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| Fill in this information to identify your case: | |
|---|-------------------------------|
| United States Bankruptcy Court for the: | |
| Northern District of: Illinois (State) | |
| Case number (if known) | Chapter you are filing under: |
| | Chapter 7 Chapter 11 |
| | Chapter 12 Chapter 13 |

Official Form 101

Voluntary Petition for Individuals Filing for Bankruptcy

12/17

The bankruptcy forms use you and Debtor 1 to refer to a debtor filing alone. A married couple may file a bankruptcy case together—called a joint case—and in joint cases, these forms use you to ask for information from both debtors. For example, if a form asks, "Do you own a car, "the answer would be yes if either debtor owns a car. When information is needed about the spouses separately, the form uses Debtor 1 and Debtor 2 to distinguish between them. In joint cases, one of the spouses must report information as Debtor 1 and the other as Debtor 2. The same person must be Debtor 1 in all of the forms.

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

| Pa | art 1: Identify Yourself | | |
|----|---|----------------------------|---|
| | | About Debtor 1: | About Debtor 2 (Spouse Only in a Joint Case): |
| 1. | Your full name | Nicole | |
| | Write the name that is on | First name | First name |
| | your government-issued picture identification (for | Middle name | Middle name |
| | example, your driver's | Patten | |
| | license or passport | Last name | Last name |
| | Bring your picture identification to your meeting with the trustee. | Suffix (Sr., Jr., II, III) | Suffix (Sr., Jr., II, III) |
| 2. | All other names you | | |
| | have used in the last | First name | First name |
| | 8 years | | |
| | Include your married or | Middle name | Middle name |
| | maiden names. | Lastinana | Lastronia |
| | | Last name | Last name |
| | | First name | First name |
| | | The thank | Thermane |
| | | Middle name | Middle name |
| | | | |
| | | Last name | Last name |
| 3. | Only the last 4 digits of your Social | XXX - XX- 0794 | xxx - xx- |
| | Security number or federal Individual | OR | OR |
| | Taxpayer Identification number (ITIN) | 9 xx - xx- | 9 xx - xx- |

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| Debtor 1 Nicole First Name | Patten Middle Name Last Name | Case number (if known) |
|--|---|--|
| | About Debtor 1: | About Debtor 2 (Spouse Only in a Joint Case): |
| 4. Any business names and Employer | I have not used any business names or EINs. | I have not used any business names or EINs. |
| Identification Numbers (EIN) you have used in the last | Business name | Business name |
| 8 years Include trade names and | Business name | Business name |
| doing business as names | EIN | EIN |
| | EIN | EIN |
| 5. Where you live | 3552 Marseilles Ln | If Debtor 2 lives at a different address: |
| | Number Street | Number Street |
| | Hazel Crest Illinois 60429 City State Zip Code | City State Zip Code |
| | Cook County | County |
| | If your mailing address is different from the one above, fill it in here. Note that the court will send any notices to you at this mailing address. | If Debtor 2's mailing address is different from yours, fill it in here. Note that the court will send any notices to this mailing address. |
| | Number Street | Number Street |
| | City State Zip Code | City State Zip Code |
| 6. Why you are choosing this district | Check one: | Check one: |
| to file for bankruptcy | Over the last 180 days before filing this petition, I have lived in this district longer than in any other district. | Over the last 180 days before filing this petition, I have lived in this district longer than in any other district. |
| | I have another reason. Explain. (See 28 U.S.C. §§ 1408.) | I have another reason. Explain. (See 28 U.S.C. §§ 1408.) |
| | | |
| | | |
| | | |
| | | |

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| Debtor 1 Nicole | | Patten | Case number (if kno | own) |
|---|---|---|---|--|
| First Name | Middle Name | Last Name | | |
| Part 2: Tell the Court Abo | out Your Bankruptcy Cas | se | | |
| 7. The chapter of the Bankruptcy Code you are choosing to file under | | escription of each, see <i>Notice Req</i>). Also, go to the top of page 1 and | | C. § 342(b) for Individuals Filing for opriate box. |
| 8. How you will pay the fee | more details about he cashier's check, or may pay with a credit I need to pay the fee Individuals to Pay You I request that my fee judge may, but is not the official poverty line. | now you may pay. Typically, if y noney order. If your attorney is t card or check with a pre-print e in installments. If you choos your Filing Fee in Installments (Core be waived (You may request t required to, waive your fee, ar ne that applies to your family sion, you must fill out the Applie | ou are paying the submitting your sed address. e this option, significial Form 103 this option only and may do so on size and you are to submit the submitted of the submitted | the clerk's office in your local court for e fee yourself, you may pay with cash, payment on your behalf, your attorney an and attach the <i>Application for SA</i>). If you are filing for Chapter 7. By law, a ly if your income is less than 150% of unable to pay the fee in installments). If the Chapter 7 Filing Fee Waived (Official |
| 9. Have you filed for bankruptcy within the last 8 years? | No. Yes. District District District | When When | MM / DD / YYYY | Case number Case number Case number |
| 10. Are any bankruptcy cases pending or being filed by a spouse who is not filing this case with you, or by a business partner, or by an affiliate? | Ves. Debtor District Debtor District | When | MM / DD / YYYY | Relationship to you Case number, if known Relationship to you Case number, if known |
| 11. Do you rent your residence? | ✓ No. Go to lin | d obtained an eviction judgment a ine 12. Initial Statement About an Eviction nkruptcy petition. | | et You (Form 101A) and file it with |

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Patten Debtor 1 Nicole __ Case number (if known) Middle Name First Name Last Name Part 3: Report About Any Businesses You Own as a Sole Proprietor 12. Are you a sole No. Go to Part 4. **✓** proprietor of any fullor part-time Yes. Name and location of business business? Name of business, if any A sole proprietorship is a business you operate as an Number Street individual, and is not a separate legal entity such as a corporation, partnership, or LLC. If you have more than City State Zip Code one sole proprietorship, use a Check the appropriate box to describe your business: separate sheet and Health Care Business (as defined in 11 U.S.C. § 101(27A)) attach it to this petition. Single Asset Real Estate (as defined in 11 U.S.C. § 101(51B)) Stockbroker (as defined in 11 U.S.C. § 101(53A)) Commodity Broker (as defined in 11 U.S.C. § 101(6)) None of the above 13. Are you filing under If you are filing under Chapter 11, the court must know whether you are a small business debtor so that it can set Chapter 11 of the appropriate deadlines. If you indicate that you are a small business debtor, you must attach your most recent balance **Bankruptcy Code and** sheet, statement of operations, cash-flow statement, and federal income tax return or if any of these documents do not exist, follow the procedure in 11 U.S.C. § 11 16(1)(B). are you a small business debtor? No. I am not filing under Chapter 11. V For a definition of small business debtor, No. I am filing under Chapter 11, but I am NOT a small business debtor according to the definition in the see 11 U.S.C. § Bankruptcy Code. 101(51D). Yes. I am filing under Chapter 11 and I am a small business debtor according to the definition in the Bankruptcy Report if You Own or Have Any Hazardous Property or Any Property That Needs Immediate Attention 14. Do you own or have **V** No. any property that Yes. What is the hazard? poses or is alleged to pose a threat of imminent and If immediate attention is needed, why is it needed? identifiable hazard to public health or safety? Or do you Where is the property? own any property Street Number that needs immediate attention? For example, do you own perishable goods, City State Zip Code or livestock that must be fed, or a building that needs urgent repairs?

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Debtor 1 Nicole Patten Case number (if known)
First Name Middle Name Last Name

Part 5: Explain Your Efforts to Receive a Briefing About Credit Counseling **About Debtor 1:** About Debtor 2 (Spouse Only in a Joint Case): You must check one: You must check one: 15. Tell the court whether you have I received a briefing from an approved credit I received a briefing from an approved credit received briefing counseling agency within the 180 days before I counseling agency within the 180 days before I about credit filed this bankruptcy petition, and I received a filed this bankruptcy petition, and I received a counseling. certificate of completion. certificate of completion. Attach a copy of the certificate and the payment plan. Attach a copy of the certificate and the payment plan. The law requires that if any, that you developed with the agency. if any, that you developed with the agency. you receive a briefing about credit ☐ I received a briefing from an approved credit I received a briefing from an approved credit counseling before you counseling agency within the 180 days before I counseling agency within the 180 days before I file for bankruptcy. filed this bankruptcy petition, but I do not have a filed this bankruptcy petition, but I do not have a certificate of completion. certificate of completion. You must truthfully check one of the Within 14 days after you file this bankruptcy petition, Within 14 days after you file this bankruptcy petition, following choices. If you MUST file a copy of the certificate and payment you MUST file a copy of the certificate and payment you cannot do so, you are not eligible to file. I certify that I asked for credit counseling services I certify that I asked for credit counseling services from an approved agency, but was unable to from an approved agency, but was unable to If you file anyway, the obtain those services during the 7 days after I obtain those services during the 7 days after I court can dismiss your made my request, and exigent circumstances made my request, and exigent circumstances case, you will lose merit a 30-day temporary waiver of the merit a 30-day temporary waiver of the whatever filing fee you requirement. requirement. paid, and your creditors can begin To ask for a 30-day temporary waiver of the To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what requirement, attach a separate sheet explaining what collection activities efforts you made to obtain the briefing, why you were efforts you made to obtain the briefing, why you were again. unable to obtain it before you filed for bankruptcy, and unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this what exigent circumstances required you to file this Your case may be dismissed if the court is dissatisfied Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before with your reasons for not receiving a briefing before you filed for bankruptcy. you filed for bankruptcy. If the court is satisfied with your reasons, you must still If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed. If you do not do so, your case may be dismissed. Any extension of the 30-day deadline is granted only Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days. for cause and is limited to a maximum of 15 days. I am not required to receive a briefing about credit I am not required to receive a briefing about credit counseling because of: counseling because of: Incapacity. I have a mental illness or a mental Incapacity. I have a mental illness or a mental deficiency that makes me deficiency that makes me incapable of realizing or making incapable of realizing or making rational decisions about finances. rational decisions about finances. My physical disability causes me to Disability. My physical disability causes me to Disability. be unable to participate in a be unable to participate in a briefing in person, by phone, or briefing in person, by phone, or through the internet, even after I through the internet, even after I reasonably tried to do so. reasonably tried to do so. Active duty. I am currently on active military Active duty. I am currently on active military duty in a military combat zone. duty in a military combat zone. If you believe you are not required to receive a briefing If you believe you are not required to receive a briefing about credit counseling, you must file a motion for about credit counseling, you must file a motion for waiver of credit counseling with the court. waiver of credit counseling with the court.

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Patten Debtor 1 Nicole Case number (if known) Middle Name First Name Last Name Part 6: **Answer These Questions for Reporting Purposes** 16a. Are your debts primarily consumer debts? Consumer debts are defined in 11 U.S.C. § 101(8) as 16. What kind of debts do incurred by an individual primarily for a personal, family, or household purpose." you have? No. Go to line 16b. Yes. Go to line 17. 16b. Are your debts primarily business debts? Business debts are debts that you incurred to obtain money for a business or investment or through the operation of the business or investment. No. Go to line 16c. Yes. Go to line 17. 16c. State the type of debts you owe that are not consumer debts or business debts. 17. Are you filing under No. I am not filing under Chapter 7. Go to line 18. Chapter 7? Do you estimate that Yes. I am filing under Chapter 7. Do you estimate that after any exempt property is excluded and administrative after any exempt expenses are paid that funds will be available to distribute to unsecured creditors? property is excluded **V** No. and administrative expenses are paid that Yes. funds will be available for distribution to unsecured creditors? **7** 1-49 1,000-5,000 25,001-50,000 18. How many creditors 50-99 5,001-10,000 50,001-100,000 do you estimate that 100-199 10,001-25,000 More than 100,000 you owe? 200-999 \$0-\$50,000 \$1,000,001-\$10 million \$500,000,001-\$1 billion 19. How much do you \$50,001-\$100,000 \$10,000,001-\$50 million \$1,000,000,001-\$10 billion estimate your assets \$100,001-\$500,000 \$50,000,001-\$100 million \$10,000,000,001-\$50 billion to be worth? \$500,001-\$1 million \$100,000,001-\$500 million More than \$50 billion \$0-\$50,000 \$1,000,001-\$10 million \$500,000,001-\$1 billion 20. How much do you \$50,001-\$100,000 \$10,000,001-\$50 million \$1,000,000,001-\$10 billion estimate your liabilities to be? \$100,001-\$500,000 \$50,000,001-\$100 million \$10,000,000,001-\$50 billion \$500,001-\$1 million \$100,000,001-\$500 million More than \$50 billion Sign Below Part 7: I have examined this petition, and I declare under penalty of perjury that the information provided is true and For you correct. If I have chosen to file under Chapter 7, I am aware that I may proceed, if eligible, under Chapter 7, 11,12, or 13 of title 11, United States Code. I understand the relief available under each chapter, and I choose to proceed under Chapter 7. If no attorney represents me and I did not pay or agree to pay someone who is not an attorney to help me fill out this document, I have obtained and read the notice required by 11 U.S.C. § 342(b). I request relief in accordance with the chapter of title 11, United States Code, specified in this petition. I understand making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571. X X /s/ Nicole Patten Signature of Debtor 1 Signature of Debtor 2 Executed on _ 1/5/2018 Executed on MM / DD / YYYY MM / DD / YYYY

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| Debtor 1 Nicole | | Patten | Case number (ii | f known) |
|--|----------------------------|--------------------------|--------------------------|--|
| First Name | Middle Name | Last Name | | |
| For your attorney, if you are represented by one | eligibility to proceed und | ler Chapter 7, 11, 12, d | or 13 of title 11, Unite | nave informed the debtor(s) about ad States Code, and have explained the also certify that I have delivered to the |
| If you are not | debtor(s) the notice requ | ired by 11 U.S.C. § 34 | 2(b) and, in a case in | which § 707(b)(4)(D) applies, certify that I |
| represented by an | have no knowledge after | an inquiry that the inf | ormation in the sched | dules filed with the petition is incorrect. |
| attorney, you do not | 4.5 | | | |
| need to file this page. | /s/ Brittney Mansfiel | d | Date _ | 1/5/2018 |
| | Signature of Attorney for | or Debtor | | MM / DD / YYYY |
| | | | | |
| | | | | |
| | Brittney Mansfield | | | |
| | Printed name | | | |
| | Semrad Law Firm | | | |
| | Firm name | | | |
| | 11101 S. Western Ave | nue | | |
| | Street | | | |
| | | | | |
| | | | | |
| | Chicago | | Illinois | 60643 |
| | City | | State | Zip Code |
| | O and and and a second | | | |
| | Contact phone | | Email address | bmansfield@semradlaw.com |
| | | | | |
| | Bar number | | State | |
| | Dai Hullibol | | State | |

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| Fill in this infor | mation to identify your ca | ase: | | |
|---------------------------|----------------------------|-------------|------------------------------|--|
| Debtor 1 | Nicole | | Patten | |
| | First Name | Middle Name | Last Name | |
| Debtor 2 | | | | |
| (Spouse, if filing) | First Name | Middle Name | Last Name | |
| United States E | Bankruptcy Court for the: | Northern | District of Illinois (State) | |
| Case number (If known) | | | (Glate) | |

| | Check if | this | is | an |
|---|----------|---------|----|----|
| _ | amende | d filii | ng | |

Official Form 106Sum

Summary of Your Assets and Liabilities and Certain Statistical Information 12/1

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Fill out all of your schedules first; then complete the information on this form. If you are filing amended schedules after you file your original forms, you must fill out a new Summary and check the box at the top of this page.

| | Your assets Value of what you own |
|--|--|
| Schedule A/B: Property (Official Form 106A/B) | \$0.00 |
| 1a. Copy line 55, Total real estate, from Schedule A/B | ψ0.00 |
| 1b. Copy line 62, Total personal property, from Schedule A/B | \$13,053.00 |
| 1c. Copy line 63, Total of all property on Schedule A/B | \$13,053.00 |
| art 2: Summarize Your Liabilities | |
| | Your liabilities Amount you owe |
| Schedule D: Creditors Who Have Claims Secured by Property (Official Form 106D) | \$15,380.00 |
| 2a. Copy the total you listed in Column A, Amount of claim, at the bottom of the last page of Part 1 of Schedule D | 4.0,000.00 |
| Schedule E/F: Creditors Who Have Unsecured Claims (Official Form 106E/F) | \$0.00 |
| 3a. Copy the total claims from Part 1 (priority unsecured claims) from line 6e of Schedule E/F | |
| 3b. Copy the total claims from Part 2 (nonpriority unsecured claims) from line 6j of Schedule E/F | \$71,724.00 |
| Your total liabilities | \$87,104.00 |
| art 3: Summarize Your Income and Expenses | |
| . Schedule I: Your Income (Official Form 106I) | 00.440.00 |
| Copy your combined monthly income from line 12 of Schedule I | \$2,143.98 ———————————————————————————————————— |
| | |

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| Debte | or 1 Nicole | | Patten | Case number (if known) | |
|--------------|-----------------------------------|-------------------------------|---|---|------------|
| | First Name | Middle Name | Last Name | • | |
| Part 4 | Answer These Que | stions for Administrat | ive and Statistical Recor | ds | |
| 6. Ar | e you filing for bankruptcy | under Chapters 7, 11, o | r 13? | | |
| Г | No. You have nothing to | report on this part of the fo | rm. Check this box and subm | it this form to the court with your other sche | edules. |
| _ _ | Yes. | | | | |
| | <u> </u> | _ | | | |
| 7. Wh | nat kind of debt do you ha | | | | |
| ✓ | | | mer debts are those incurred by ill out lines 8-10 for statistical | by an individual primarily for a personal, purposes. 28 U.S.C. § 159. | |
| | 7 Your debts are not prim | arily consumer debts. Yo | u have nothing to report on th | nis part of the form. Check this box and sub | mit |
| | this form to the court with | | | <u>'</u> | |
| 8. F | rom the Statement of You | r Current Monthly Incom | e: Copy your total current mor | nthly income from Official | \$2,905.40 |
| | orm 122A-1 Line 11; OR , F | | | , | ΨΣ,000.10 |
| 9. | Convetho following angolio | actororios of alaima fra | m Part 4, line 6 of Schedule | E/E. | |
| J | copy the following specia | categories of claims no | III Fait 4, lille o oi schedule | | |
| I | From Part 4 on Schedule | E/F, copy the following: | | Total claim | |
| | 9a. Domestic support obliga | tions (Copy line 6a) | | \$0.00 | |
| | | , , , | . (0 | \$0.00 | |
| , | 9b. Taxes and certain other | debts you owe the governi | nent. (Copy line 6b.) | <u>-</u> | |
| ! | 9c. Claims for death or person | onal injury while you were i | ntoxicated. (Copy line 6c.) | \$0.00 | |
| , | 9d. Student loans. (Copy lin | e 6f.) | | \$60,745.00 | |
| , | 9e. Obligations arising out o | f a separation agreement o | r divorce that you did not repo | ort as \$0.00 | |
| | priority claims. (Copy line 6g | | | | |
| , | 9f. Debts to pension or prof | t-sharing plans, and other | similar debts. (Copy line 6h.) | \$0.00 | |
| | | 5 | (, | | |

\$60,745.00

9g. Total. Add lines 9a through 9f.

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| Fill in this i | nformation to identify your o | case: | - | |
|---|---|---|---|--|
| Dalatau 1 | Nicolo | | Detter | |
| Debtor 1 | Nicole First Name | Middle Na | Patten Ame Last Name | _ |
| Debtor 2 | T HOL HAMO | Wildalo W | and East Name | |
| (Spouse, if fili | ^{ng)} First Name | Middle Na | ame Last Name | _ |
| United Stat | tes Bankruptcy Court for the: | Northern | District of Illinois (State) | _ |
| Case numl (If known) | ber | | | _ |
| Officia | I Form 106A/B | | | Check if this is an amended filing |
| Sched | lule A/B: Prope | erty | | 12/ |
| category w responsible write your | where you think it fits best. The for supplying correct info name and case number (if | Be as complete an rmation. If more sp known). Answer ev | d accurate as possible. If two marrie ace is needed, attach a separate sho | in more than one category, list the asset in the ed people are filing together, both are equally eet to this form. On the top of any additional pages, |
| | | _ | | |
| | No. Go to Part 2 | quitable interest ii | n any residence, building, land, or sin | milar property? |
| | | | | |
| ш | Yes. Where is the property? | | | |
| | | | What is the property? Check all that a | |
| 1.1 | Street address, if available, or | other description | Single-family home | the amount of any secured claims on Schedule D: Creditors Who Have Claims Secured by Property. |
| | | , | Duplex or multi-unit building | Current value of the Current value of the |
| | | | Condominium or cooperative | entire property? portion you own? |
| | | | Manufactured or mobile home | |
| | Number Street | | Land | Describe the nature of your ownership |
| | | | Investment property | interest (such as fee simple, tenancy by |
| | City State | Zip Code | Timeshare Other | the entireties, or a life estate), if known. |
| | • | · | Who has an interest in the property? | Check if this is community property (see instructions) |
| | | | one. | |
| | | | Debtor 1 only | |
| | | | Debtor 2 only | |
| | | | Debtor 1 and Debtor 2 only | |
| | | | At least one of the debtors and ano | other |
| | | | Other information you wish to add a property identification number: | about this item, such as local |
| If you o | own or have more than one, I | liet hara: | property identification fulliber. | |
| ii you (| own of have more than one, i | iot moro. | What is the property? Check all that a | apply. Do not deduct secured claims or exemptions. Put |
| 1.2 | | | Single-family home | the amount of any secured claims on Schedule D: |
| | Street address, if available, or | other description | Duplex or multi-unit building | Creditors Who Have Claims Secured by Property. |
| | | | Condominium or cooperative | Current value of the Current value of the entire property? portion you own? |
| | | | Manufactured or mobile home | —————————————————————————————————————— |
| | Niah au Ohuant | | Land | |
| | Number Street | | Investment property | Describe the nature of your ownership interest (such as fee simple, tenancy by |
| | City State | 7in Codo | Timeshare Other | the entireties, or a life estate), if known. |
| | City State | Zip Code | | · |
| | | | Who has an interest in the property? one. | Check if this is community property (see instructions) |
| | | | Debtor 1 only | ш |
| | | | Debtor 2 only | |
| | | | Debtor 1 and Debtor 2 only | |
| | | | At least one of the debtors and ano | other |
| | | | Other information you wish to add a | |
| | | | property identification number: | |

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| Street address, if available, or other description | icole | per (if known) |
|--|--|---|
| Single-family home | rst Name Middle Name | |
| Number Street Investment property Investment Investment property Investment | address, if available, or other description | |
| Who has an interest in the property? Check one. (see instructions) | | Describe the nature of your ownership interest (such as fee simple, tenancy by the entireties, or a life estate), if known. |
| 2. Add the dollar value of the portion you own for all of your entries from Part 1, including any entries for pages you have attached for Part 1. Write that number here. Part 2: Describe Your Vehicles | | |
| Do you own, lease, or have legal or equitable interest in any vehicles, whether they are registered or not? Include any vehicles you own that someone else drives. If you lease a vehicle, also report it on Schedule G: Executory Contracts and Unexpired Leases. 3. Cars, vans, trucks, tractors, sport utility vehicles, motorcycles No Yes 3.1 Make Model: Year: Year: Approximate mileage: Other information: 2013 Nissan Sentra Who has an interest in the property? Check one. Do not deduct secured claims one. Creditors Who Have Claims Secured claims Creditors Who Have Claims Secured | | es for pages |
| 3.1 Make Nissan Sentra Year: 2013 | , lease, or have legal or equitable intere it someone else drives. If you lease a vehicle | • |
| Approximate mileage: 53000 Other information: 2013 Nissan Sentra Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Current value of the entire property? \$6050.00 \$6050.00 | Model: Sentra | Do not deduct secured claims or exemptions. Put the amount of any secured claims on Schedule D Creditors Who Have Claims Secured by Property. |
| | Other information: | entire property? portion you own? |
| 3.2 Make Who has an interest in the property? Check One the amount of any secured claims one. Year: Debtor 1 only Creditors Who Have Claims Secured Claims of the amount of any secured claims of the amount of the amount of any secured claims of the amount of the amoun | Model: | Do not deduct secured claims or exemptions. Put the amount of any secured claims on Schedule D Creditors Who Have Claims Secured by Property. |
| | | |

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| tor 1 | First Name | Middle Name | Patten Last Name | Case number | ei (II Kriowii) | |
|-------|--|------------------------|--|--|--|--|
| | | | | | | |
| 3.3 | Make Model: | | Who has an interest in the poone. | roperty? Check | Do not deduct secured the amount of any secu | • |
| | Year: | | Debtor 1 only | | Creditors Who Have Cla | |
| | Approximate mileage: | | = ' | | | , , , |
| | , pp.oxatooago. | | Debtor 2 only | | Current value of the | Current value of the |
| | Other information: | | Debtor 1 and Debtor 2 only | y | entire property? | portion you own? |
| | | | At least one of the debtors | and another | | |
| | | | Check if this is communi | ty property (see | | |
| | | | instructions) | | | |
| 3.4 | Make | | Who has an interest in the p | roperty? Check | Do not deduct secured | |
| | Model: | | one. | | the amount of any secu | |
| | Year: | | Debtor 1 only | | Creditors Who Have Cla | ilms Securea by Property |
| | Approximate mileage: | | Debtor 2 only | | Current value of the | Current value of the |
| | Other information: | | Debtor 1 and Debtor 2 only | y | entire property? | portion you own? |
| | | | At least one of the debtors | and another | | |
| | | | Check if this is communi | ty property (see | | |
| | | | instructions) | | | |
| Exar | nples: Boats, trailers, motors No | • | er recreational vehicles, other v t, fishing vessels, snowmobiles, m | • | | |
| Exar | nples: Boats, trailers, motors No Yes | • | | otorcycle accessori | | • |
| Exar | nples: Boats, trailers, motors No Yes Make | • | t, fishing vessels, snowmobiles, m Who has an interest in the p | otorcycle accessori | Do not deduct secured | red claims on <i>Schedule</i> |
| Exar | nples: Boats, trailers, motors No Yes Make Model: | • | t, fishing vessels, snowmobiles, m Who has an interest in the plone. | otorcycle accessori | Do not deduct secured the amount of any secu Creditors Who Have Cla | red claims on Schedule ims Secured by Propert |
| Exar | nples: Boats, trailers, motors No Yes Make Model: Year: | • | t, fishing vessels, snowmobiles, m Who has an interest in the prone. Debtor 1 only | notorcycle accessori | Do not deduct secured the amount of any secu | red claims on <i>Schedule</i> |
| Exar | nples: Boats, trailers, motors No Yes Make Model: Year: Approximate mileage: | • | who has an interest in the pone. Debtor 1 only Debtor 2 only Debtor 2 only | notorcycle accessori roperty? Check | Do not deduct secured the amount of any secu Creditors Who Have Cla | red claims on Schedule lims Secured by Propert Current value of the |
| Exar | nples: Boats, trailers, motors No Yes Make Model: Year: Approximate mileage: | • | who has an interest in the prone. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors | roperty? Check y and another | Do not deduct secured the amount of any secu Creditors Who Have Cla | red claims on Schedule hims Secured by Property Current value of the |
| Exar | nples: Boats, trailers, motors No Yes Make Model: Year: Approximate mileage: | • | who has an interest in the pone. Debtor 1 only Debtor 2 only Debtor 2 only | roperty? Check y and another | Do not deduct secured the amount of any secu Creditors Who Have Cla | red claims on Schedule lims Secured by Propert Current value of the |
| Exar | nples: Boats, trailers, motors No Yes Make Model: Year: Approximate mileage: | • | who has an interest in the prone. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors Check if this is communi | roperty? Check y and another ity property (see | Do not deduct secured the amount of any secu Creditors Who Have Cla | red claims on Schedule ims Secured by Propert Current value of the portion you own? |
| Exar | nples: Boats, trailers, motors No Yes Make Model: Year: Approximate mileage: Other information: | • | Who has an interest in the prone. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors Check if this is communi instructions) | roperty? Check y and another ity property (see | Do not deduct secured the amount of any secu Creditors Who Have Cla Current value of the entire property? Do not deduct secured the amount of any secu | red claims on Schedule hims Secured by Propert Current value of the portion you own? claims or exemptions. Fored claims on Schedule |
| Exar | nples: Boats, trailers, motors No Yes Make Model: Year: Approximate mileage: Other information: Make Model: Year: | • | Who has an interest in the prone. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors Check if this is communi instructions) Who has an interest in the properties of the debtors | roperty? Check y and another ity property (see | Do not deduct secured the amount of any secu Creditors Who Have Cla Current value of the entire property? Do not deduct secured | red claims on Schedule hims Secured by Propert Current value of the portion you own? claims or exemptions. Fored claims on Schedule |
| Exar | nples: Boats, trailers, motors No Yes Make Model: Year: Approximate mileage: Other information: Make Model: | • | who has an interest in the prone. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors Check if this is communi instructions) Who has an interest in the prone. | roperty? Check y and another ity property (see | Do not deduct secured the amount of any secu Creditors Who Have Cla Current value of the entire property? Do not deduct secured the amount of any secu | red claims on Schedule hims Secured by Propert Current value of the portion you own? claims or exemptions. Fored claims on Schedule |
| Exar | nples: Boats, trailers, motors No Yes Make Model: Year: Approximate mileage: Other information: Make Model: Year: | • | Who has an interest in the prone. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors Check if this is communi instructions) Who has an interest in the prone. Debtor 1 only | roperty? Check y and another ity property (see roperty? Check | Do not deduct secured the amount of any secu Creditors Who Have Clate Current value of the entire property? Do not deduct secured the amount of any secu Creditors Who Have Clate Creditors Who Have Clate Creditors Who Have Clate Creditors Control of the secured the amount of any secu Creditors Who Have Clate Control of the secured the secur | red claims on Schedule lims Secured by Propert Current value of the portion you own? claims or exemptions. F red claims on Schedule lims Secured by Propert |
| Exar | nples: Boats, trailers, motors No Yes Make Model: Year: Approximate mileage: Other information: Make Model: Year: Approximate mileage: | • | Who has an interest in the prone. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors Check if this is communi instructions) Who has an interest in the prone. Debtor 1 only Debtor 2 only | roperty? Check y and another ity property (see roperty? Check | Do not deduct secured the amount of any secu Creditors Who Have Class Current value of the entire property? Do not deduct secured the amount of any secu Creditors Who Have Class Current value of the | red claims on Schedule ims Secured by Property Current value of the portion you own? claims or exemptions. Pured claims on Schedule ims Secured by Property Current value of the |
| Exar | nples: Boats, trailers, motors No Yes Make Model: Year: Approximate mileage: Other information: Make Model: Year: Approximate mileage: | • | Who has an interest in the prone. Debtor 1 only Debtor 2 only At least one of the debtors Check if this is communi instructions) Who has an interest in the prone. Debtor 1 only Debtor 2 only At least one of the debtors one. Debtor 1 only Debtor 2 only At least one of the debtors only At least one of the debtors | roperty? Check y and another ity property (see roperty? Check | Do not deduct secured the amount of any secu Creditors Who Have Class Current value of the entire property? Do not deduct secured the amount of any secu Creditors Who Have Class Current value of the | red claims on Schedule ims Secured by Property Current value of the portion you own? claims or exemptions. Pured claims on Schedule ims Secured by Property Current value of the |
| Exar | nples: Boats, trailers, motors No Yes Make Model: Year: Approximate mileage: Other information: Make Model: Year: Approximate mileage: | • | Who has an interest in the prone. Debtor 1 only Debtor 2 only At least one of the debtors Check if this is communi instructions) Who has an interest in the prone. Debtor 1 only Debtor 2 only Debtor 2 only At least one of the debtors only Check if this is communi instructions. | roperty? Check y and another ity property (see roperty? Check | Do not deduct secured the amount of any secu Creditors Who Have Class Current value of the entire property? Do not deduct secured the amount of any secu Creditors Who Have Class Current value of the | red claims on Schedule ims Secured by Propert Current value of the portion you own? claims or exemptions. For the portion of |
| 4.1 | nples: Boats, trailers, motors No Yes Make Model: Year: Approximate mileage: Other information: Make Model: Year: Approximate mileage: Other information: | s, personal watercraft | Who has an interest in the prone. Debtor 1 only Debtor 2 only At least one of the debtors Check if this is communi instructions) Who has an interest in the prone. Debtor 1 only Debtor 2 only At least one of the debtors one. Debtor 1 only Debtor 2 only At least one of the debtors only At least one of the debtors | roperty? Check y and another (ty property (see roperty? Check | Do not deduct secured the amount of any secu Creditors Who Have Class Current value of the entire property? Do not deduct secured the amount of any secu Creditors Who Have Class Current value of the entire property? | red claims on Schedule ims Secured by Propert Current value of the portion you own? claims or exemptions. For the portion of |

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Patten Debtor 1 Nicole Case number (if known) Middle Name First Name Last Name Part 3: **Describe Your Personal and Household Items** Current value of the Do you own or have any legal or equitable interest in any of the following items? portion you own? Do not deduct secured claims or exemptions. 6. Household goods and furnishings Examples: Major appliances, furniture, linens, china, kitchenware Yes. Describe... Used bedroom furniture, used living room furniture \$200.00 7. Electronics Examples: Televisions and radios; audio, video, stereo, and digital equipment; computers, printers, scanners; music Yes. Describe... Used cell phone, 2 used tvs, \$100.00 8. Collectibles of value Examples: Antiques and figurines; paintings, prints, or other artwork; books, pictures, or other art objects; stamp, coin, or baseball card collections, other collections, memorabilia, collectibles Yes. Describe... 9. Equipment for sports and hobbies Examples: Sports, photographic, exercise, and other hobby equipment; bicycles, pool tables, golf clubs, skis; canoes and kayaks; carpentry tools; musical instruments No Yes. Describe... 10. Firearms Examples: Pistols, rifles, shotguns, ammunition, and related equipment Yes. Describe... 11. Clothes Examples: Everyday clothes, furs, leather coats, designer wear, shoes, accessories Yes. Describe... **Used Clothing** \$500.00 12. Jewelry Examples: Everyday jewelry, costume jewelry, engagement rings, wedding rings, heirloom jewelry, watches, gems, gold, silver No Yes. Describe... 13. Non-farm animals Examples: Dogs, cats, birds, horses Yes. Describe... 14. Any other personal and household items you did not already list, including any health aids you did not list No Yes. Describe... 15. Add the dollar value of all of your entries from Part 3, including any entries for pages you have attached \$950.00 for Part 3. Write that number here

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| Debte | or 1 Nicole First Name | Middle Name | Patten Last Name | Case number (if known) | |
|--------------|---|--|------------------------------|---|---|
| Part 4 | | | Last Ivanie | | |
| | | y legal or equitable interest | in any of the followi | ing? | Current value of the portion you own? Do not deduct secured claims or exemptions. |
| 16. C | amples: Money you ha | ve in your wallet, in your home, in | | on hand when you file your petition | \$15.00 |
| | Deposits of money Examples: Checking, sa | | ; certificates of deposit; s | Cash:shares in credit unions, brokerage houses, stitution, list each. | |
| | ✓ Yes | | Institution name: | | |
| | | 17.1. Checking account: | Chase | | \$25.00 |
| | | 17.2. Checking account: | TCF | | \$0.00 |
| | | 17.3. Savings account: | | | |
| | | 17.4. Savings account: | | | |
| | | 17.5. Certificates of deposit: | | | |
| | | 17.6. Other financial account: | | | |
| | | 17.7. Other financial account: | | | |
| | | 17.8. Other financial account: | | | |
| | | 17.9. Other financial account: | | | |
| | | or publicly traded stocks, investment accounts with broker Institution or issuer name: | age firms, money market | t accounts | |
| | | | | | |
| | Non-publicly traded s an LLC, partnership, a | | ted and unincorporate | d businesses, including an interest in | |
| | Yes. Give specific information about them | Name of entity | | % of ownership: | |
| | | | | | |

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| Deb | tor 1 Nicole First Name | Middle Name | Patten Last Name | Case number (if known) | |
|-----|--|--|----------------------------|--|---|
| 20. | Government and corp Negotiable instruments | orate bonds and other negotial include personal checks, cashiers | ble and non-negotiab | otes, and money orders. | |
| | Non-negotiable instrum No Yes. Give specific information about them | ents are those you cannot transfe | r to someone by signir | g or delivering them. | |
| | | | | | |
| | | | | | |
| 21. | Retirement or pension Examples: Interests in II | |), thrift savings accoun | ts, or other pension or profit-sharing plans | |
| | ✓ No | Type of account: | Institution name: | | |
| | Yes. List each account | 401(k) or similar plan: | | | |
| | separately. | Pension plan: | | | |
| | | IRA: | | | |
| | | Retirement account: | | | |
| | | Keogh: | | | |
| | | Additional account: | | | |
| | | Additional account: | | | · |
| 22. | | prepayments d deposits you have made so that with landlords, prepaid rent, publi | | | |
| | Yes | Electric: | | | |
| | | Gas: | | | |
| | | Heating oil: | | | |
| | | Security deposit on rental unit: | | | |
| | | Prepaid rent: | | | |
| | | Telephone: | | | |
| | | Water: | | | |
| | | Rented furniture: | | | |
| | | Other: | | | |
| 23. | | or a periodic payment of money to | you, either for life or fo | or a number of years) | |
| | ✓ No Yes | Issuer name and description: | | | |
| | | | | | |
| | | | | | |
| | | | | | |

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| Debto | or 1 Nicole | NAC-JUL N | | umber (if known) | |
|-------|--|--|--|---|--|
| 24. | First Name | Middle N | lame Last Name ount in a qualified ABLE program, or under a qualifi | ad state tuition program | |
| 24. | 26 U.S.C. §§ 530(b)(1), 529A(b) | | | ed state tuition program. | |
| | No Institution name a | and descrip | tion. Separately file the records of any interests.11 U.S.C | C. § 521(c): | |
| | | | | | |
| | | | | | |
| | | | | | |
| 25. | Trusts, equitable or future inte exercisable for your benefit | erests in p | roperty (other than anything listed in line 1), and rig | hts or powers | |
| | ✓ No | | | | |
| | Yes. Describe | | | | |
| | | | | | |
| 26. | | | secrets, and other intellectual property s, proceeds from royalties and licensing agreements | | |
| | ✓ No | | | | |
| | Yes. Describe | | | | |
| | | | | | |
| 27. | Licenses, franchises, and othe Examples: Building permits, exclu | _ | intangibles ses, cooperative association holdings, liquor licenses, pro | ofessional licenses | |
| | √ No | | | | |
| | Yes. Describe | | | | |
| | | | | | |
| | | | | | |
| Mon | ney or property owed to you | ? | | | Current value of the |
| Mon | ney or property owed to you | ? | | | Current value of the portion you own? Do not deduct secured claims or exemptions |
| | ney or property owed to you Tax refunds owed to you | ? | | | portion you own? |
| | | ? | | | portion you own? Do not deduct secured |
| | Tax refunds owed to you ☐ No ☐ Yes. Give specific information | 1 | Est Federal Tax Refund (EIC and CTC) | Federal: | portion you own? Do not deduct secured |
| | Tax refunds owed to you | n whether | Est Federal Tax Refund (EIC and CTC) Est Federal Tax Refund | | portion you own? Do not deduct secured claims or exemptions. \$6013.00 |
| | Tax refunds owed to you No Yes. Give specific information about them, including v | n whether urns | | Federal: State: | portion you own? Do not deduct secured claims or exemptions. |
| 28. | Tax refunds owed to you No Yes. Give specific information about them, including v you already filed the retuand the tax years | n whether urns | | | portion you own? Do not deduct secured claims or exemptions. \$6013.00 |
| 28. | Tax refunds owed to you No Yes. Give specific information about them, including v you already filed the retuand the tax years | n whether urns | | State: Local: | portion you own? Do not deduct secured claims or exemptions. \$6013.00 \$0.00 |
| 28. | Tax refunds owed to you No Yes. Give specific information about them, including v you already filed the retuand the tax years | n whether urns | Est Federal Tax Refund | State: Local: | portion you own? Do not deduct secured claims or exemptions. \$6013.00 \$0.00 |
| 28. | Tax refunds owed to you No Yes. Give specific information about them, including you already filed the retuand the tax years Family support Examples: Past due or lump sum | n whether urns | Est Federal Tax Refund | State: Local: | portion you own? Do not deduct secured claims or exemptions. \$6013.00 \$0.00 |
| 28. | Tax refunds owed to you No Yes. Give specific information about them, including vou already filed the retuand the tax years Family support Examples: Past due or lump sum | n whether urns | Est Federal Tax Refund | State: Local: tlement, property settlemen | portion you own? Do not deduct secured claims or exemptions. \$6013.00 \$0.00 \$0.00 |
| 28. | Tax refunds owed to you No Yes. Give specific information about them, including vou already filed the retuand the tax years Family support Examples: Past due or lump sum | n whether urns | Est Federal Tax Refund | State: Local: tlement, property settlemer Alimony: | portion you own? Do not deduct secured claims or exemptions. \$6013.00 \$0.00 \$0.00 tt \$0.00 |
| 28. | Tax refunds owed to you No Yes. Give specific information about them, including vou already filed the retuand the tax years Family support Examples: Past due or lump sum | n whether urns | Est Federal Tax Refund | State: Local: tlement, property settlemer Alimony: Maintenance: | portion you own? Do not deduct secured claims or exemptions. \$6013.00 \$0.00 \$0.00 tt \$0.00 \$0.00 |
| 28. | Tax refunds owed to you No Yes. Give specific information about them, including v you already filed the retu and the tax years Family support Examples: Past due or lump sum No Yes. Give specific information | n whether urns alimony, s | Est Federal Tax Refund | State: Local: tlement, property settlement Alimony: Maintenance: Support: | portion you own? Do not deduct secured claims or exemptions. \$6013.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 |
| 29. | Tax refunds owed to you No Yes. Give specific information about them, including vou already filed the retuand the tax years Family support Examples: Past due or lump sum No Yes. Give specific information Other amounts someone owes Examples: Unpaid wages, disabiliti | whether urns alimony, s n | Est Federal Tax Refund | State: Local: tlement, property settlemer Alimony: Maintenance: Support: Divorce settlement: Property settlement: | ## Solution ## Sol |
| 29. | Tax refunds owed to you No Yes. Give specific information about them, including vou already filed the retuand the tax years Family support Examples: Past due or lump sum No Yes. Give specific information Other amounts someone owes Examples: Unpaid wages, disabiliti | whether urns alimony, s n | Est Federal Tax Refund pousal support, child support, maintenance, divorce set | State: Local: tlement, property settlemer Alimony: Maintenance: Support: Divorce settlement: Property settlement: | ## Solution ## Sol |
| 29. | Tax refunds owed to you No Yes. Give specific information about them, including vou already filed the retuand the tax years Family support Examples: Past due or lump sum No Yes. Give specific information Other amounts someone owes Examples: Unpaid wages, disabiliting Social Security benefits | whether urns alimony, s n | Est Federal Tax Refund pousal support, child support, maintenance, divorce set | State: Local: tlement, property settlemer Alimony: Maintenance: Support: Divorce settlement: Property settlement: | ## Solution ## Sol |

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| Deb | tor 1 Nicole | | Patten | Case number (if known) | |
|--------|----------------------------|--------------------------------|-----------------------------------|---|------------------------------|
| | First Name | Middle Name | Last Name | · · · · · | |
| 21 | Interests in incresses | - aliaiaa | | | |
| 31. | Interests in insurance | | | harrania an mankada in a mana | |
| | Examples: Health, disabil | ity, or life insurance; nealtr | i savings account (HSA); credit, | homeowner's, or renter's insurance | |
| | ✓ No | | | | |
| | ✓ NO | (| Company name: | Beneficiary: | Surrender or refund value: |
| | Yes. Name the insur | ance company | ompary name. | Borronolary. | carrottact of folding value. |
| | of each policy and lis | | | | |
| | or each pency and m | _ | | | |
| | | | | | |
| | | - | | | |
| | | | | | |
| | | - | | | |
| 32. | Any interest in property | y that is due you from so | meone who has died | | |
| | If you are the beneficiary | of a living trust, expect pro | oceeds from a life insurance poli | cy, or are currently entitled to receive | |
| | property because someo | ne has died. | | | |
| | | | | | |
| | ✓ No | | | | |
| | Yes. Describe | | | | |
| | Tes. Describe | | | | |
| | | | | | |
| | | | | | |
| 33 | Claims against third na | rties whether or not vo | u have filed a lawsuit or made | a demand for navment | |
| 00. | | | ince claims, or rights to sue | c a demand for payment | |
| | Examples. Accidents, em | ployment disputes, insure | ince claims, or rights to sue | | |
| | No No | | | | |
| | | | | | |
| | Yes. Describe | | | | |
| | _ | | | | |
| | | | | | |
| 0.4 | 011 | alla dalah dalah asa se | | and a first of the state of the first | |
| 34. | _ | inliquidated claims of e | ery nature, including counte | rclaims of the debtor and rights | |
| | to set off claims | | | | |
| | | | | | |
| | ✓ No | | | | |
| | Yes. Describe | | | | |
| | | | | | |
| | | | | | |
| | - | | | | |
| 35. | Any financial assets yo | u did not already list | | | |
| | | | | | |
| | ✓ No | | | | |
| | Yes. Describe | | | | |
| | Tes. Describe | | | | |
| | | | | | |
| | | | | | |
| | | | | | |
| 36. | Add the dollar value of | all of your entries from | Part 4, including any entries | for pages you have attached | |
| ' ' | | • | | | \$6053.00 |
| | TOT I art 4: Write that in | umber nere | | | |
| | | | | | |
| | | | | | |
| | | | | | |
| Part | 5: Describe Any Bu | siness-Related Prop | erty You Own or Have an | Interest In. List any real estate in Par | t 1. |
| . α. τ | | | | | |
| 37. | Do you own or have any | y legal or equitable inte | rest in any business-related p | roperty? | |
| | | | | | Current value of the |
| | No. Go to Part 6. | | | | portion you own? |
| | Yes. Go to line 38. | | | | • |
| | Tes. do to line so: | | | | Do not deduct secured claims |
| | | | | | or exemptions |
| 38. | Accounts receivable or | commissions you alrea | dy earned | | |
| | | • | | | |
| | ✓ No | | | | |
| | | | | | |
| | Yes. Describe | | | | |
| | | | | | |
| | | | | | |
| 30 | Office equipment form | chings and supplies | | | |
| 39. | Office equipment, furni | | nadama niintara aasias faasa | anahinan muga talanharan dada dada dada da | tropio dovices |
| | ⊏xampies: Business-relat | eu computers, software, r | nouems, printers, copiers, fax m | nachines, rugs, telephones, desks, chairs, elec | STOTIC DEVICES |
| | No. | | | | |
| | ✓ No | | | | |
| | Yes. Describe | | | | |
| | | | | | |
| | L | | | | |
| | | | | | |

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| Deb | tor 1 Nicole | Patten | Case number (if known) | |
|--------|----------------------------------|--|-----------------------------|------------------------------|
| | First Name | Middle Name Last Name | | |
| 40. | Machinery, fixtures, equipme | ent, supplies you use in business, and tools of your tra | de | |
| | ✓ No | | | |
| | Yes. Describe | | | |
| | _ | | | |
| | | _ | | |
| 41. | Inventory | | | |
| | ✓ No | | | |
| | Yes. Describe | | | |
| | | | | |
| | - | | | |
| 42. | Interests in partnerships or j | oint ventures | | |
| | ✓ No | | | |
| | Yes. Give specific | Name of entity: | % of ownership: | |
| | information about | | | |
| | them | | | |
| | | | | |
| | | | | |
| 43. | Customer lists, mailing lists, o | or other compilations | | |
| | ✓ No | | | |
| | | personally identifiable information (as defined in 11 U.S.C. | 8 101(/14))2 | |
| | Tes. Do your lists include | personally identifiable information (as defined in 11 0.0.0. | 3 101(4174): | |
| | No | | | |
| | Yes. Describe | | | |
| | _ | | | |
| 44. | Any business-related proper | ty you did not already list | | |
| | ✓ No | | | |
| | Yes. Give specific | | | |
| | information | | | |
| | | | | |
| | | | | <u> </u> |
| | | | | |
| | | | | |
| | | | | |
| | | | | _ |
| | | | | |
| | | our entries from Part 5, including any entries for pages | | |
| lor Pa | art 5. Write that number here | | | |
| Part | 6. Describe Any Farm- a | and Commercial Fishing-Related Property You | Own or Have an Interest In. | |
| · ar | If you own or have an interest | t in farmland, list it in Part 1. | | |
| 46. | Do you own or have any lega | al or equitable interest in any farm- or commercial fish | ning-related property? | |
| | | • | | Current value of the |
| | No. Go to Part 7. | | F | oortion you own? |
| | Yes. Go to line 47. | | | Do not deduct secured claims |
| 17 | Farm animals | | d | or exemptions |
| 47. | Examples: Livestock, poultry, f | farm-raised fish | | |
| | | | | |
| | ✓ No | | | |
| | Yes. Describe | | | |
| | | | | |

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| Debte | or 1 Nicole | ama | Middle Name | Patten Last Name | Case number (if known) | |
|----------------|--------------|-----------------|--|-------------------------|---------------------------|--------------|
| 48. | | ther growing | | Last Name | | |
| | ✓ No | | | | | |
| | Yes. | Describe | | | | |
| | | | | | | |
| 49. | Farm and | l fishing equip | oment, implements, machinery, fixt | ures, and tools of tra | de | |
| | ✓ No | | | | | |
| | Yes. | Describe | | | | |
| | _ | | | | | |
| 50. | | l fishing supp | lies, chemicals, and feed | | | |
| | ✓ No Yes. | Describe | | | | |
| | | | | | | |
| 51. | Any farm | - and comme | rcial fishing-related property you di | d not already list | | |
| | ✓ No | | | | | |
| | Yes. | Describe | | | | |
| | | | | | | |
| 52. Ac | ld the dol | lar value of a | I of your entries from Part 6, includ | ling any entries for pa | ages you have attached | |
| for Pa ▶ | rt 6. Write | that number | r here | | | |
| | | | | | | |
| | _ | | | | | |
| Part 7 | | | perty You Own or Have an Inte | | id Not List Above | |
| | | | perty of any kind you did not alread s, country club membership | y list? | | |
| | ✓ No | | | | | |
| | | Give specific | | | | |
| | | | | | | |
| | | | | | | |
| 54. Ac | ld the dol | lar value of a | I of your entries from Part 7. Write | that number here | | > |
| | | | | | | |
| | | | | | | |
| | | | | | | |
| Part 8 | List t | he Totals of | Each Part of this Form | | | |
| 55 D | ort 1. Tot | al raal aatata | line 2 | | | |
| 55. F | art 1. 100 | ai reai estate | , iiile 2 | | | |
| 56. p | art 2 tota | l vehicles, lin | e 5 | \$6050.00 | | |
| 57. P a | art 3: Tota | al personal ar | nd household items, line 15 | \$950.00 | | |
| 58. P a | art 4: Tota | al financial as | ssets, line 36 | \$6053.00 | | |
| 59. P | art 5: Tot | al business-r | elated property, line 45 | | | |
| 60. P | art 6: Tot | al farm- and | fishing-related property, line 52 | | | |
| 61. P | art 7: Tot | al other prop | erty not listed, line 54 | | | |
| 62. T | otal pers | onal property. | Add lines 56 through 61. | \$13053.00 | | + \$13053.00 |
| | | | | | Copy personal property to | otal P |
| | | | National Arthur Add Booker Brown | | | \$13053.00 |
| 63. T 0 | otal of all | property on S | Schedule A/B. Add line 55 + line 62 | | | ļ . |

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| Debtor 1 | Nicole | | Patten | Case number (if known) | |
|----------|-------------|--------------|------------|------------------------|---|
| | First Names | Middle Noses | Look Names | | - |

Schedule A/B: Property. Additional page

| Part 3: Describe | Your Personal and Household Items | |
|---------------------|---|--|
| Do you own or ha | ve any legal or equitable interest in any of the following items? | Current value of the portion you own? Do not deduct secured claims or exemptions. |
| 6.2. Household good | ds and furnishings | |
| No | | |
| Yes. Describe | Snowblower | \$150.00 |

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| | | | - age =- | |
|---------------------|-----------------------------|----------------|----------------------|---------------------------------|
| Fill in this infor | rmation to identify your ca | ise: | | |
| Debtor 1 | Nicole | | Patten | |
| | First Name | Middle Name | Last Name | |
| Debtor 2 | | | | |
| (Spouse, if filing) | First Name | Middle Name | Last Name | |
| United States I | Bankruptcy Court for the: | Northern | District of Illinois | |
| | | | (State) | |
| Case number | | | | |
| (If known) | | | | |
| Official | Form 106C | | | Check if this is amended filing |
| Schedul | e C: The Prope | erty You Clain | n as Exempt | 04 |
| | | | | |

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Using the property you listed on Schedule A/B: Property (Official Form 106A/B) as your source, list the property that you claim as exempt. If more space is needed, fill out and attach to this page as many copies of Part 2: Additional Page as necessary. On the top of any additional pages, write your name and case number (if known).

For each item of property you claim as exempt, you must specify the amount of the exemption you claim. One way of doing so is to state a specific dollar amount as exempt. Alternatively, you may claim the full fair market value of the property being exempted up to the amount of any applicable statutory limit. Some exemptions—such as those for health aids, rights to receive certain benefits, and tax-exempt retirement funds—may be unlimited in dollar amount. However, if you claim an exemption of 100% of fair market value under a law that limits the exemption to a particular dollar amount and the value of the property is determined to exceed that amount, your exemption would be limited to the applicable statutory amount.

| Pa | rt 1: Identify the Property You Clair | m as Exempt | | | | | | | |
|----|---|---|---|---|--|--|--|--|--|
| 1. | 1. Which set of exemptions are you claiming? Check one only, even if your spouse is filling with you. | | | | | | | | |
| | You are claiming state and federal nonbankruptcy exemptions. 11 U.S.C. § 522(b)(3) | | | | | | | | |
| | You are claiming federal exemptions. 11 U.S.C. § 522(b)(2) | | | | | | | | |
| 2. | For any property you list on Schedule A/B that you claim as exempt, fill in the information below. | | | | | | | | |
| | Brief description of the property and line on Schedule A/B that lists this property | Current value of the portion you own Copy the value from Schedule A/B | Amount of the exemption you claim Check only one box for each exemption. | Specific laws that allow exemption | | | | | |
| | Brief description: Federal, Est Federal Tax Refund (EIC and CTC) Line from Schedule A/B: 28 | \$4,373.00 | \$4,373.00; \$0.00 100% of fair market value, up to any applicable statutory limit | 735 ILCS 5/12-1001(g)(1); 735 ILCS 5/12-1001(b) | | | | | |
| | Brief description: Federal, Est Federal Tax Refund Line from Schedule A/B: 28 | \$1,640.00 | \$1,640.00 100% of fair market value, up to any applicable statutory limit | 735 ILCS 5/12-1001(b) | | | | | |
| 3. | ✓ No | ery 3 years after that for | 375? cases filed on or after the date of adjustment.) vithin 1,215 days before you filed this case? | | | | | | |

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Debtor 1 Nicole Patten Case number (if known) Middle Name First Name Last Name Part 2: **Additional Page** Brief description of the property and **Current value of** Amount of the exemption you claim Specific laws that allow exemption line on Schedule A/B that lists this the portion you property Check only one box for each exemption. own Copy the value from Schedule A/B Brief 735 ILCS 5/12-1001(b) \$25.00 description: **✓** \$25.00 Checking account, 100% of fair market value, up to any Chase applicable statutory limit Line from Schedule A/B: 17 735 ILCS 5/12-1001(b) Brief \$15.00 description: **✓** \$15.00 Cash on Hand 100% of fair market value, up to any Line from applicable statutory limit Schedule A/B: 16 735 ILCS 5/12-1001(b) Brief \$0.00 description: \$0 Checking account, TCF 100% of fair market value, up to any Line from applicable statutory limit Schedule A/B: 735 ILCS 5/12-1001(b) \$200.00 description: **✓** \$200.00 Used bedroom furniture, 100% of fair market value, up to any used living room furniture applicable statutory limit Line from Schedule A/B: 06 Brief 735 ILCS 5/12-1001(a) \$500.00 description: \$500.00 **Used Clothing** 100% of fair market value, up to any Line from applicable statutory limit Schedule A/B: 735 ILCS 5/12-1001(b) Brief \$100.00 description: **✓** \$100.00 Used cell phone, 2 used 100% of fair market value, up to any tvs,

applicable statutory limit

Line from Schedule A/B:

07

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| Fill in | this information to identify your ca | se: | | | |
|------------------|---|---|---|---|------------------------------------|
| | | | | | |
| Debto | or 1 <u>Nicole</u> First Name | Patten Middle Name Last Name | | | |
| Debto | | Middle Name | | | |
| | se, if filing) First Name | Middle Name Last Name | | | |
| Unite | d States Bankruptcy Court for the: | Northern District of Illinois (State) | | | |
| Case (If knov | number vn) | (State) | | | |
| Off | icial Form 106D | | | | Check if this is an amended filing |
| Scl | hedule D: Credite | ors Who Have Claims Secure | ed by Prop | erty | 12/1 |
| more | | ole. If two married people are filing together, both are equa onal Page, fill it out, number the entries, and attach it to t | | | |
| 1. I | Do any creditors have claims se | ecured by your property? | | | |
| | • | nit this form to the court with your other schedules. You hav | e nothing else to rep | ort on this form. | |
| | Yes. Fill in all of the information | • | - · · · · · · · · · · · · · · · · · · · | | |
| Part | <u> </u> | . 556 | | | |
| 2. | List all secured claims. If a credit separately for each claim. If more the | tor has more than one secured claim, list the creditor nan one creditor has a particular claim, list the other creditors the claims in alphabetical order according to the creditor's | Column A Amount of claim Do not deduct the value of collateral. | Column B Value of collateral that supports this claim | Column C Unsecured portion If any |
| 2.1 | Santander Consumer USA | Describe the average that accuracy the electric | \$15,030.00 | \$6,050.00 | \$8,980.00 |
| | Creditor's Name | Describe the property that secures the claim: | <u> </u> | Ψ σ,σ σ σ σ σ σ | φο,οοοίοο |
| | Number Street | 2013 Nissan Sentra As of the date you file, the claim is: Check all that apply. Contingent | | | |
| | TUSTIN CA 92780 | Unliquidated | | | |
| | City State ZIP Code | Disputed | | | |
| | Who owes the debt? Check one. Debtor 1 only | Nature of lien. Check all that apply. | | | |
| | Debtor 2 only | An agreement you made (such as mortgage or secured | | | |
| | Debtor 1 and Debtor 2 only | car loan) | | | |
| | At least one of the debtors | Statutory lien (such as tax lien, mechanic's lien) | | | |
| | and another | Judgment lien from a lawsuit | | | |
| | Check if this claim relates to a community debt | Other (including a right to offset) | | | |
| | Date debt was 8/2015 incurred | Last 4 digits of account number1000 | | | |
| 2.2 | Sears Creditor's Name | Describe the property that secures the claim: | \$350.00 | \$150.00 | \$200.00 |
| | P.O. Box 965009 | Snowblower Lease | | | |
| | Number Street | As of the date you file, the claim is: Check all that apply. | | | |
| | JCPenney Credit Services customer service C/O SYNCB | Contingent | | | |
| | Orlando FL 32896 | Unliquidated | | | |
| | City State ZIP Code | Disputed | | | |
| | Who owes the debt? Check one. | Nature of lien. Check all that apply. | | | |
| | ✓ Debtor 1 only Debtor 2 only | An agreement you made (such as mortgage or secured car loan) | | | |
| | Debtor 1 and Debtor 2 only | Statutory lien (such as tax lien, mechanic's lien) | | | |
| | At least one of the debtors | Judgment lien from a lawsuit | | | |
| | and another | Other (including a right to offset) | | | |
| | Check if this claim relates to a community debt | | | | |
| | Date debt was incurred | Last 4 digits of account number | | | |
| | Add the dollar value of y | your entries in Column A on this page. Write that number | \$15,380.00 | | |

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| Fill | in this infor | mation to identify your c | ase: | | | | | |
|-----------------------|---|---|---|--|---|--|---|--|
| Deb | otor 1 | Nicole | | Patten | | | | |
| | | First Name | Middle Name | Last Name | | | | |
| | otor 2 | E: N | NAC LIL NI | | | | | |
| (Spc | ouse, if filing) | First Name | Middle Name | Last Name | | | | |
| Uni | ted States B | ankruptcy Court for the: | Northern | District of Illinois | | | | |
| Coo | se number | | | (State) | | | | |
| | own) | | | | | | | |
| Of | ficial F | orm 106E/F | | | | Che | ck if this is an | amended filing |
| | | | ditoro Who | Hava Haaa | aurad Claima | | | |
| <u> </u> | meat | ile E/F: Gre | cartors willo | nave unse | cured Claims | | | 12/15 |
| othe Forn clair | er party to a n 106A/B) a ms that are entries in t | any executory contracts and on Schedule G: Exe listed in Schedule D: C | s or unexpired leases that cutory Contracts and Une Creditors Who Hold Claims | could result in a claim xpired Leases (Official Secured by Property. It | ns and Part 2 for creditors wi Also list executory contract: Form 106G). Do not include f more space is needed, copy top of any additional pages, v | on <i>Schedu</i> ny creditor the Part yo | <i>lle A/B: Prop</i> s with partia ou need, fill it | perty (Official Illy secured t out, number |
| Par | t 1: List | All of Your PRIORIT | Y Unsecured Claims | | | | | |
| 1. | Do any cr | editors have priority ur | secured claims against y | ou? | | | | |
| | √ No. 0 | Go to Part 2. | | | | | | |
| | Yes. | | | | | | | |
| 2. | listed, ider As much a Continuat | ntify what type of claim it as possible, list the claims ion Page of Part 1. If mor | is. If a claim has both priorit | y and nonpriority amount ling to the creditor's nam particular claim, list the otl | | both priority | and nonprior | rity amounts. |
| | | | | | | Tatal | Deignitus | Managiagitu |

claim

amount

amount

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| Debto | r 1 Nicole First Name Middle Name | Patten Last Name | Case number (if known) | | | | | | | | |
|---------|--|---------------------|--|-------------|--|--|--|--|--|--|--|
| Dort (| | | | | | | | | | | |
| 3. C | Part 2: List All of Your NONPRIORITY Unsecured Claims 3. Do any creditors have nonpriority unsecured claims against you? No. You have nothing to report in this part. Submit this form to the court with your other schedules. Yes. | | | | | | | | | | |
| u If | 4. List all of your nonpriority unsecured claims in the alphabetical order of the creditor who holds each claim. If a creditor has more than one priority unsecured claim, list the creditor separately for each claim. For each claim listed, identify what type of claim it is. Do not list claims already included in Part 1. If more than one creditor holds a particular claim, list the other creditors in Part 3.If you have more than four priority unsecured claims fill out the Continuation Page of Part 2. | | | | | | | | | | |
| | | | | Total claim | | | | | | | |
| 4.1 | CAPITALONE Nonpriority Creditor's Name c/o Pollack & Rosen, P.C | | Last 4 digits of account number 8669 When was the debt incurred? 5/2010 | \$3,474.00 | | | | | | | |
| | | 144 Code | As of the date you file, the claim is: Check all that apply. Contingent Unliquidated Disputed Type of NONPRIORITY unsecured claim: Student loans Obligations arising out of a separation agreement or divorce that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts Other. Specify CreditCard | | | | | | | | |
| 4.2 | Check N Go | _ | Last 4 digits of account number | \$2,180.00 | | | | | | | |
| | City State Zip Who incurred the debt? Check one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this claim relates to a community described by the claim subject to offset? No Yes | 632 Code | As of the date you file, the claim is: Check all that apply. Contingent Unliquidated Disputed Type of NONPRIORITY unsecured claim: Student loans Obligations arising out of a separation agreement or divorce that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts Other. Specify Pay Day Loan | | | | | | | | |
| 4.3 | COMENITY BANK/CARSONS Nonpriority Creditor's Name 1314 PINELOG ROAD Number Street | | When was the debt incurred? 10/2012 As of the date you file, the claim is: Check all that apply. Contingent | \$2,533.00 | | | | | | | |
| | | | Unliquidated Disputed Type of NONPRIORITY unsecured claim: Student loans Obligations arising out of a separation agreement or divorce that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts Other. Specify CreditCard | | | | | | | | |

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Patten Debtor 1 Nicole Case number (if known) Middle Name First Name Last Name Part 2: Your NONPRIORITY Unsecured Claims - Continuation Page After listing any entries on this page, number them beginning with 4.5, followed by 4.6, and so forth. **Total claim** CONVERGENT OUTSOURCING 4.4 \$238.00 Last 4 digits of account number 4183 Nonpriority Creditor's Name 10750 HAMMERLY BLVD #200 When was the debt incurred? 7/2017 Number As of the date you file, the claim is: Check all that apply. Contingent Houston Texas 77043 Unliquidated City State Zip Code Who incurred the debt? Check one. Disputed Debtor 1 only Type of NONPRIORITY unsecured claim: Debtor 2 only Student loans Debtor 1 and Debtor 2 only Obligations arising out of a separation agreement or divorce that you did not report as priority claims At least one of the debtors and another Debts to pension or profit-sharing plans, and other similar Check if this claim relates to a community debt 001 Collection; Collecting for Is the claim subject to offset? Other. Specify ORIGINAL CREDITOR: SPRINT **✓** No Yes CREDIT ONE BANK NA \$331.00 Last 4 digits of account number 6506 Nonpriority Creditor's Name PO BOX 98875 When was the debt incurred? Number As of the date you file, the claim is: Check all that apply. Contingent LAS VEGAS 89193 Nevada Unliquidated City State Zip Code Who incurred the debt? Check one. Disputed Debtor 1 only Type of NONPRIORITY unsecured claim: Debtor 2 only Student loans Debtor 1 and Debtor 2 only Obligations arising out of a separation agreement or divorce that you did not report as priority claims At least one of the debtors and another Debts to pension or profit-sharing plans, and other similar Check if this claim relates to a community debt Other. Specify ___ CreditCard Is the claim subject to offset? **✓** No Yes DEPT OF ED/NAVIENT 4.6 \$10,470.00 Last 4 digits of account number _ Nonpriority Creditor's Name PO BOX 9635 When was the debt incurred? 3/2011 Number As of the date you file, the claim is: Check all that apply. Contingent WILKES BARRE 18773 Pennsylvania Unliquidated City Zip Code Who incurred the debt? Check one. Disputed

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Patten Debtor 1 Nicole Case number (if known) Middle Name First Name Last Name Part 2: Your NONPRIORITY Unsecured Claims - Continuation Page After listing any entries on this page, number them beginning with 4.5, followed by 4.6, and so forth. **Total claim** 4.7 **DEPT OF ED/NAVIENT** \$10,140.00 Last 4 digits of account number 0816 Nonpriority Creditor's Name PO BOX 9635 When was the debt incurred? 8/2011 Number Street As of the date you file, the claim is: Check all that apply. Contingent WILKES BARRE Pennsylvania 18773 Unliquidated City State Zip Code Who incurred the debt? Check one. Disputed Debtor 1 only Type of NONPRIORITY unsecured claim: Debtor 2 only ✓ Student loans Debtor 1 and Debtor 2 only Obligations arising out of a separation agreement or divorce that you did not report as priority claims At least one of the debtors and another Debts to pension or profit-sharing plans, and other similar Check if this claim relates to a community debt Other. Specify _ Is the claim subject to offset? **✓** No Yes 4.8 DEPT OF ED/NAVIENT \$7,488.00 Last 4 digits of account number 0813 Nonpriority Creditor's Name PO BOX 9635 When was the debt incurred? 8/2012 Number Street As of the date you file, the claim is: Check all that apply. Contingent WILKES BARRE Pennsylvania 18773 Unliquidated City State Zip Code Who incurred the debt? Check one. Disputed Debtor 1 only Type of NONPRIORITY unsecured claim: Debtor 2 only ✓ Student loans Debtor 1 and Debtor 2 only Obligations arising out of a separation agreement or divorce that you did not report as priority claims At least one of the debtors and another Debts to pension or profit-sharing plans, and other similar Check if this claim relates to a community debt Other. Specify _ Is the claim subject to offset? **✓** No Yes DEPT OF ED/NAVIENT 4.9 \$6,011.00 Last 4 digits of account number _ Nonpriority Creditor's Name PO BOX 9635 When was the debt incurred? 2/2011 Number As of the date you file, the claim is: Check all that apply. Contingent WILKES BARRE 18773 Pennsylvania Unliquidated City Zip Code Who incurred the debt? Check one. Disputed Debtor 1 only Type of NONPRIORITY unsecured claim: Debtor 2 only Student loans Debtor 1 and Debtor 2 only Obligations arising out of a separation agreement or divorce that you did not report as priority claims At least one of the debtors and another

No Yes

Check if this claim relates to a community debt

Is the claim subject to offset?

debts
Other. Specify

Debts to pension or profit-sharing plans, and other similar

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Patten Debtor 1 Nicole Case number (if known) Middle Name First Name Last Name Part 2: Your NONPRIORITY Unsecured Claims - Continuation Page After listing any entries on this page, number them beginning with 4.5, followed by 4.6, and so forth. **Total claim** 4.10 **DEPT OF ED/NAVIENT** \$5,870.00 Last 4 digits of account number Nonpriority Creditor's Name PO BOX 9635 When was the debt incurred? 8/2011 Number Street As of the date you file, the claim is: Check all that apply. Contingent WILKES BARRE Pennsylvania 18773 Unliquidated City State Zip Code Who incurred the debt? Check one. Disputed Debtor 1 only Type of NONPRIORITY unsecured claim: Debtor 2 only ✓ Student loans Debtor 1 and Debtor 2 only Obligations arising out of a separation agreement or divorce that you did not report as priority claims At least one of the debtors and another Debts to pension or profit-sharing plans, and other similar Check if this claim relates to a community debt Other. Specify _ Is the claim subject to offset? **✓** No Yes 4.11 DEPT OF ED/NAVIENT \$5,278.00 Last 4 digits of account number 0427 Nonpriority Creditor's Name PO BOX 9635 When was the debt incurred? 4/2009 Number Street As of the date you file, the claim is: Check all that apply. Contingent WILKES BARRE Pennsylvania 18773 Unliquidated Zip Code City State Who incurred the debt? Check one. Disputed Debtor 1 only Type of NONPRIORITY unsecured claim: Debtor 2 only ✓ Student loans Debtor 1 and Debtor 2 only Obligations arising out of a separation agreement or divorce that you did not report as priority claims At least one of the debtors and another Debts to pension or profit-sharing plans, and other similar Check if this claim relates to a community debt Other. Specify _ Is the claim subject to offset? **✓** No Yes DEPT OF ED/NAVIENT 4.12 \$5,220.00 Last 4 digits of account number _ Nonpriority Creditor's Name PO BOX 9635 When was the debt incurred? 10/2009 Number As of the date you file, the claim is: Check all that apply. Contingent WILKES BARRE 18773 Pennsylvania Unliquidated City Zip Code Who incurred the debt? Check one. Disputed Debtor 1 only Type of NONPRIORITY unsecured claim: Debtor 2 only ✓ Student loans Debtor 1 and Debtor 2 only Obligations arising out of a separation agreement or divorce that you did not report as priority claims At least one of the debtors and another Debts to pension or profit-sharing plans, and other similar Check if this claim relates to a community debt debts Other. Specify Is the claim subject to offset? No

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Patten Debtor 1 Nicole Case number (if known) Middle Name First Name Last Name Part 2: Your NONPRIORITY Unsecured Claims - Continuation Page After listing any entries on this page, number them beginning with 4.5, followed by 4.6, and so forth. **Total claim** 4.13 **DEPT OF ED/NAVIENT** \$4,907.00 Last 4 digits of account number Nonpriority Creditor's Name PO BOX 9635 When was the debt incurred? 5/2012 Number Street As of the date you file, the claim is: Check all that apply. Contingent WILKES BARRE Pennsylvania 18773 Unliquidated City State Zip Code Who incurred the debt? Check one. Disputed Debtor 1 only Type of NONPRIORITY unsecured claim: Debtor 2 only ✓ Student loans Debtor 1 and Debtor 2 only Obligations arising out of a separation agreement or divorce that you did not report as priority claims At least one of the debtors and another Debts to pension or profit-sharing plans, and other similar Check if this claim relates to a community debt Other. Specify _ Is the claim subject to offset? **✓** No Yes 4.14 DEPT OF ED/NAVIENT \$2,934.00 Last 4 digits of account number 0511 Nonpriority Creditor's Name PO BOX 9635 When was the debt incurred? 5/2012 Number Street As of the date you file, the claim is: Check all that apply. Contingent WILKES BARRE Pennsylvania 18773 Unliquidated Zip Code City State Who incurred the debt? Check one. Disputed Debtor 1 only Type of NONPRIORITY unsecured claim: Debtor 2 only ✓ Student loans Debtor 1 and Debtor 2 only Obligations arising out of a separation agreement or divorce that you did not report as priority claims At least one of the debtors and another Debts to pension or profit-sharing plans, and other similar Check if this claim relates to a community debt Other. Specify _ Is the claim subject to offset? **✓** No Yes DEPT OF ED/NAVIENT 4.15 \$2,427.00 Last 4 digits of account number _ Nonpriority Creditor's Name PO BOX 9635 When was the debt incurred? 10/2009 Number As of the date you file, the claim is: Check all that apply. Contingent WILKES BARRE 18773 Pennsylvania Unliquidated City Zip Code Who incurred the debt? Check one. Disputed Debtor 1 only Type of NONPRIORITY unsecured claim: Debtor 2 only ✓ Student loans Debtor 1 and Debtor 2 only Obligations arising out of a separation agreement or divorce that you did not report as priority claims At least one of the debtors and another Debts to pension or profit-sharing plans, and other similar Check if this claim relates to a community debt debts Other. Specify Is the claim subject to offset? No

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Patten Debtor 1 Nicole Case number (if known) Middle Name First Name Last Name Your NONPRIORITY Unsecured Claims - Continuation Page After listing any entries on this page, number them beginning with 4.5, followed by 4.6, and so forth. **Total claim** 4.16 Franciscan Alliance \$50.00 Last 4 digits of account number Nonpriority Creditor's Name When was the debt incurred? PO Box 3475 Number As of the date you file, the claim is: Check all that apply. Contingent Unliquidated 43607 Toledo Ohio City Zip Code Disputed Who incurred the debt? Check one. Type of NONPRIORITY unsecured claim: Debtor 1 only Student loans Debtor 2 only Obligations arising out of a separation agreement or Debtor 1 and Debtor 2 only divorce that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar At least one of the debtors and another Check if this claim relates to a community debt Other. Specify ____ Unpaid Medical Is the claim subject to offset? **✓** No Yes \$971.00 4.17 Great American Finance 0852 Last 4 digits of account number ___ Nonpriority Creditor's Name 7/2017 20 N Wacker Dr, Ste 2275 When was the debt incurred? Number Street As of the date you file, the claim is: Check all that apply. Contingent Chicago 60606 Illinois Unliquidated City State Zip Code Disputed Who incurred the debt? Check one. Debtor 1 only Type of NONPRIORITY unsecured claim: Debtor 2 only Student loans Debtor 1 and Debtor 2 only Obligations arising out of a separation agreement or divorce that you did not report as priority claims At least one of the debtors and another Debts to pension or profit-sharing plans, and other similar Check if this claim relates to a community debt debts Other. Specify _ 024 InstallmentLoan Is the claim subject to offset? **✓** No Yes Health Lab 4.18 \$20.00 Last 4 digits of account number Nonpriority Creditor's Name 25 North Windfield Road When was the debt incurred? n/a Number As of the date you file, the claim is: Check all that apply. Contingent Unliquidated 60190 Winfield Illinois Zip Code Disputed City State Who incurred the debt? Check one. Type of NONPRIORITY unsecured claim: Debtor 1 only Student loans Debtor 2 only Obligations arising out of a separation agreement or Debtor 1 and Debtor 2 only divorce that you did not report as priority claims At least one of the debtors and another Debts to pension or profit-sharing plans, and other similar debts Check if this claim relates to a community debt Other. Specify Unpaid Medical Is the claim subject to offset? **✓** No

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Patten Debtor 1 Nicole Case number (if known) Middle Name First Name Last Name Part 2: Your NONPRIORITY Unsecured Claims - Continuation Page After listing any entries on this page, number them beginning with 4.5, followed by 4.6, and so forth. **Total claim** 4.19 high Tech Medical Park \$120.00 Last 4 digits of account number Nonpriority Creditor's Name When was the debt incurred? 0236 Momentum Place Number As of the date you file, the claim is: Check all that apply. Contingent Unliquidated 60689 Chicago Illinois City Zip Code Disputed Who incurred the debt? Check one. Type of NONPRIORITY unsecured claim: Debtor 1 only Student loans Debtor 2 only Obligations arising out of a separation agreement or Debtor 1 and Debtor 2 only divorce that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar At least one of the debtors and another Check if this claim relates to a community debt Other. Specify ____ Unpaid Medical Is the claim subject to offset? **✓** No Yes 4.20 Ingalls Memorial Hospital \$100.00 Last 4 digits of account number _ Nonpriority Creditor's Name PO BOX 3397 When was the debt incurred? n/a Number As of the date you file, the claim is: Check all that apply. Contingent Unliquidated 60654-0397 Chicago Illinois State Zip Code Disputed City Who incurred the debt? Check one. Type of NONPRIORITY unsecured claim: Debtor 1 only Student loans Debtor 2 only Obligations arising out of a separation agreement or Debtor 1 and Debtor 2 only divorce that you did not report as priority claims At least one of the debtors and another Debts to pension or profit-sharing plans, and other similar debts Check if this claim relates to a community debt Other. Specify ___ Unpaid Medical Is the claim subject to offset? **✓** No Yes MERRICK BANK CORP 4.21 \$492.00 Last 4 digits of account number 0349 Nonpriority Creditor's Name When was the debt incurred? 4/2015 PO BOX 9201 Number Street As of the date you file, the claim is: Check all that apply. Contingent OLD BETHPAGE 11804 New York Unliquidated Zip Code State Who incurred the debt? Check one. Disputed Debtor 1 only Type of NONPRIORITY unsecured claim: Debtor 2 only Student loans Debtor 1 and Debtor 2 only Obligations arising out of a separation agreement or divorce that you did not report as priority claims At least one of the debtors and another Debts to pension or profit-sharing plans, and other similar Check if this claim relates to a community debt debts Other. Specify _ CreditCard Is the claim subject to offset? **✓** No

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| Debtor | 1 Nicole | | | Patten | Case number (if known) | | | | | |
|---------|---|--------------------|------------------|-----------------|---|-------------|--|--|--|--|
| | First Name | Middle I | Name | Last Name | | | | | | |
| Part 2: | Your NONPRIOR | ITY Unsecured | l Claims - Conti | nuation Page | | | | | | |
| | After listing any entri | es on this page, i | number them beg | inning with 4.5 | followed by 4.6, and so forth. | Total claim | | | | |
| 4.22 | The Receivable Management Services Corporation | | | Lasi | — Last 4 digits of account number — | | | | | |
| | Nonpriority Creditor's N 1250 E Diehl Rd Ste 30 | | | | n was the debt incurred? | | | | | |
| | | reet | | | file data a file the data is Observed like to a de- | | | | | |
| | PO Box 3099 | | | | of the date you file, the claim is: Check all that apply. | | | | | |
| | | | | | Contingent | | | | | |
| | Naperville | Illinois | 60563 | ⊔ | Unliquidated | | | | | |
| | City | State | Zip Code | | Disputed | | | | | |
| | Who incurred the debt? Check one. Debtor 1 only | | | Тур | | | | | | |
| | <u> </u> | | | | Student loans | | | | | |
| | Debtor 2 only | | | | | | | | | |
| | Debtor 1 and Debtor 2 only At least one of the debtors and another | | | | Obligations arising out of a separation agreement or divorce that you did not report as priority claims | | | | | |
| | | | ner | | Debts to pension or profit-sharing plans, and other similar debts | | | | | |
| | Check if this clai | m relates to a co | mmunity debt | ✓ | Other. Specify Unpaid Bill | | | | | |
| | Is the claim subject to offset? | | | ت ت | | | | | | |
| | ✓ No | | | | | | | | | |
| | Yes | | | | | | | | | |

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Debtor 1 Nicole Patten Case number (if known)

| FIRST Na | me Middle Name Last Name | | | |
|--------------------------|---|---------|----------------------|---------|
| Part 4: Add t | ne Amounts for Each Type of Unsecured Claim | | | |
| | amounts of certain types of unsecured claims. This information is nounts for each type of unsecured claim. | s for s | tatistical reporting | purpose |
| | | | Total claims | |
| Total claims from Part 1 | 6a. Domestic support obligations. | 6a. | \$0.00 | |
| | 6b. Taxes and certain other debts you owe the government | 6b. | \$0.00 | |
| | 6c. Claims for death or personal injury while you were intoxicated | 6c. | \$0.00 | |
| | 6d. Other. Add all other priority unsecured claims. Write that | 6d. | \$0.00 | |
| | amount here. 6e. Total. Add lines 6a through 6d. | 6e. | \$0.00 | |
| | de. Total. Add lines da tillough du. | oe. | | |
| | | | Total claims | |
| Total claims from Part 2 | 6f. Student loans | 6f. | \$60,745.00 | |
| | 6g. Obligations arising out of a separation agreement or divorce that you did not report as priority claims | 6g. | \$0.00 | |
| | 6h. Debts to pension or profit-sharing plans, and other similar debts | 6h. | \$0.00 | |
| | Other. Add all other nonpriority unsecured claims. Write that amount here. | 6i. | \$10,979.00 | |
| | 6i Total Add lines 6f through 6i | 6i | \$71,724.00 | |

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| Fill in this infor | mation to identify your c | ase: | | |
|---|---------------------------|-------------|------------------------------|--|
| Debtor 1 | Nicole | Patten | | |
| | First Name | Middle Name | Last Name | |
| Debtor 2 | | | | |
| (Spouse, if filing) | First Name | Middle Name | Last Name | |
| United States Bankruptcy Court for the: | | Northern | District of Illinois (State) | |
| Case number (If known) | , | | (Otato) | |

Official Form 106G

Check if this is an amended filing

Schedule G: Executory Contracts and Unexpired Leases

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the additional page, fill it out, number the entries, and attach it to this page. On the top of any additional pages, write your name and case number (if known).

- 1. Do you have any executory contracts or unexpired leases?
 - No. Check this box and file this form with the court with your other schedules. You have nothing else to report on this form.
- Yes. Fill in all of the information below even if the contracts or leases are listed on Schedule A/B: Property (Official Form 106A/B).
- 2. List separately each person or company with whom you have the contract or lease. Then state what each contract or lease is for (for example, rent, vehicle lease, cell phone). See the instructions for this form in the instruction booklet for more examples of executory contracts and unexpired leases.

Person or company with whom you have the contract or lease

State what the contract or lease is for

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| | | | Do | cument ray | gc 33 | 0171 |
|---------------|--------------------|---|---|--------------------------|------------|--|
| Fill | in this infor | mation to identify your c | ase: | | | |
| Deb | otor 1 | Nicole | | Patten | | |
| | | First Name | Middle Name | Last Name | | _ |
| | otor 2 | | | | | _ |
| (Spo | ouse, if filing) | First Name | Middle Name | Last Name | | |
| Uni | ted States B | Sankruptcy Court for the: | Northern | District of Illinois | | |
| 0 | | | | (State) | | |
| | se number lown) | | | | | _ |
| | | | | | | Check if this is an |
| | | | | | | amended filing |
| Of | ficial | Form 106H | | | | |
| | | _ | | | | |
| Sc | hedul | e H: Your Cod | lebtors | | | 12/15 |
| the c know | Do you ha No Yes | he boxes on the left. At r every question. ve any codebtors? (If yo | tach the Additional Page | not list either spouse a | top of ar | |
| 2. | Idaho, Lou | | lived in a community pro xico, Puerto Rico, Texas, W | | | nmunity property states and territories include Arizona, California, |
| | | | er spouse, or legal equiva | lent live with you at th | a tima? | |
| | | No | or spouse, or legal equiva | ione iivo with you at th | C unic: | |
| | | - | v stata or tarritary did va | ı livo? | E:II | Il in the name and current address of that person. |
| | Ш | 165. III WHICH COMMUNIC | y state or territory did you | ilve: | FIII | il in the name and current address of that person. |
| | | Name of your shouse if | ormer spouse, or legal equ | ivalent | | |
| | | Name of your spouse, i | onner spouse, or legal equ | ivalent | | |
| | | Number Street | | | | |
| | | City | State | Zip | Code | |
| | 1. 0.1 | a Parallar a a se | | | | |
| 3. | in Column | ı ı, iist ali of your codel | otors. Do not include you | r spouse as a codebto | or if your | spouse is filing with you. List the person shown in line 2 |

3. In Column 1, list all of your codebtors. Do not include your spouse as a codebtor if your spouse is filing with you. List the person shown in line a again as a codebtor only if that person is a guarantor or cosigner. Make sure you have listed the creditor on Schedule D (Official Form 106D), Schedule E/F (Official Form 106E/F), or Schedule G (Official Form 106G). Use Schedule D, Schedule E/F, or Schedule G to fill out Column 2.

Column 1: Your codebtor

Column 2: The creditor to whom you owe the debt

Check all schedules that apply:

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| | | | oamone | . α | 90 00 0 | | | |
|---|--|---|-----------------|---------|-------------|-------------|--|----------------|
| Fill in this i | nformation to identify | your case: | | | | | | |
| Debtor 1 | Nicole | | Patter | 1 | | | | |
| | First Name | Middle Name | Last N | lame | | Ch | eck if this is: | |
| Debtor 2 (Spouse, if filing | ng) First Name | Middle Name | Last N | lamo | _ | | An amended filing | |
| United State | es Bankruptcy Court for | Northern | District of III | inois | | | A supplement showing poexpenses as of the follow | |
| the: Case number | er | | (8 | State) | | | | g |
| (If known) | - | | | | | | MM / DD / YYYY | |
| Official | Form 106I | | | | | | | |
| Schedu | ule I: Your In | come | | | | | | 12/15 |
| information spouse. If n number (if I | about your spouse. I | | d your spou | se is n | ot filing w | ith you, do | not include information | on about your |
| 1. Fill in yo | our employment | | Debtor 1 | l | | | Debtor 2 | |
| | | Employment status | Emplo | oved | | | Employed | |
| | ave more than one job, separate page with | | | mploye | d | | Not Employed | |
| informati employe | ion about additional | Occupation | | | | | | |
| | oart time, seasonal, or | Occupation | | | | | _ | |
| | loyed work. | Employer's name | | | | | | |
| | ion may include student maker, if it applies. | Employer's address | Number St | reet | | | Number Street | |
| | | | | | | | _ | |
| | | | City | | State | Zip Code | City | State Zip Code |
| | | How long employed there? | | | | | | |
| Part 2: G | ive Details About N | Monthly Income | | | | | | |
| spouse unl | ess you are separated. | the date you file this form e more than one employer et to this form. | - | | | | • | |
| | · | | | | For De | btor 1 | For Debtor 2 or non-filing spouse | |
| | | ary, and commissions (before, calculate what the monthly | | 2. | | \$2,904.00 | | |
| 3. Estima | ate and list monthly ove | rtime pay. | | 3 | | + \$0.00 | | <u>-</u> _ |
| 4. Calculate gross income. Add line 2 + line 3. | | | | | | \$2,904.00 | | _] |

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| Debtor 1Nicole | Patten | Case number | (if | |
|--|-------------------------|------------------------|--------------------------------------|-------------------------|
| First Name Middle Name | Last Name | known) For Debtor 1 | For Debtor 2 or non-filing spouse | |
| Copy line 4 here | → 4. | \$2,904.00 | non-ining spouse | |
| 5. List all payroll deductions: | | <u> </u> | | |
| 5a. Tax, Medicare, and Social Security deductions | 5a. | \$480.16 | | |
| 5b. Mandatory contributions for retirement plans | 5b. | \$0.00 | | |
| 5c. Voluntary contributions for retirement plans | 5c. | \$0.00 | | |
| 5d. Required repayments of retirement fund loans | 5d. | \$0.00 | | |
| 5e. Insurance | 5e. | \$279.86 | | |
| 5f. Domestic support obligations | 5f. | \$0.00 | | |
| 5g. Union dues | 5g. | \$0.00 | | |
| | | \$0.00 + | | |
| | | | | |
| 6. Add the payroll deductions. Add lines $5a + 5b + 5c + 5d + 5e + +5h$. | 5f + 5g 6. | \$760.02 | | |
| 7. Calculate total monthly take-home pay. Subtract line 6 from lin | ne 4. 7. | \$2,143.98 | | |
| 8. List all other income regularly received: | | | | |
| 8a. Net income from rental property and from operating a business, profession, or farm | | | | |
| Attach a statement for each property and business showing gross receipts, ordinary and necessary business expenses, an | d | | | |
| the total monthly net income. | 8a | \$0.00 | | |
| 8b. Interest and dividends | 8b. | \$0.00 | | |
| 8c. Family support payments that you, a non-filing spouse, o dependent regularly receive | ra | | | |
| Include alimony, spousal support, child support, maintenance divorce settlement, and property settlement. | e, 8c. <u>.</u> | \$0.00 | | |
| 8d. Unemployment compensation | 8d. | \$0.00 | | |
| 8e. Social Security | 8e. | \$0.00 | | |
| 8f. Other government assistance that you regularly receive Include cash assistance and the value (if known) of any non-cash assistance that you receive, such as food stamps (benefit under the Supplemental Nutrition Assistance Program) or housing subsidies Specify: | | \$0.00 | | |
| 8g. Pension or retirement income | 8f. 8g | \$0.00 | | |
| | 8g. 8h. + | \$0.00 + | | |
| 8h. Other monthly income. Specify: | | | | |
| 9. Add all other income Add lines 8a + 8b + 8c + 8d + 8e + 8f +8g | + 8h. 9. | \$0.00 | | |
| 10. Calculate monthly income. Add line 7 + line 9. Add the entries in line 10 for Debtor 1 and Debtor 2 or non-filing s | 10. spouse | \$2,143.98 + | = | \$2,143.98 |
| 11. State all other regular contributions to the expenses that you include contributions from an unmarried partner, members of you friends or relatives. Do not include any amounts already included in lines 2-10 or amounts. | ır household, your d | ependents, your roomm | | |
| Specify: | odino tilat ale liot dv | anabic to pay expenses | iisted iii <i>Scrieddie 5.</i> 11 | + \$0.00 |
| | | | | Ψ0.00 |
| 12. Add the amount in the last column of line 10 to the amount Write that amount on the Summary of Schedules and Statistical S | | | , | \$2,143.98 |
| | | | | Combined monthly income |
| 13. Do you expect an increase or decrease within the year after | r you file this form? | | | |
| No. | | | | |
| Yes. Explain: | | | | |
| L 155. Explain. | | | | |
| | | | | |

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| | | Do | ocument Page 38 | of 71 | | |
|---------------------------------|---------------------------------------|--|--|-------------------------------------|----------------------|----------------------------|
| Fill in this infor | mation to identify y | our case: | | | | |
| Debtor 1 | Nicole | | Patten | | | |
| Dahta : 0 | First Name | Middle Name | Last Name | Check if this is: | | |
| Debtor 2 (Spouse, if filing) | First Name | Middle Name | Last Name | An amended filing | g | |
| United States B | ankruptcy Court for | the: Northern | District of Illinois (State) | A supplement she expenses as of the | | -petition chapter 13 date: |
| Case number (If known) | | | | | | |
| Official | Form 106 | | | | | |
| Schedule | e J: Your E | xpenses | | | | 12/15 |
| information. If (if known). Ans | | | | | | |
| 1. Is this a join | | Onoid | | | | |
| | to line 2 | | | | | |
| | | n a separate household? | | | | |
| | | i a separate nousenoiu: | | | | |
| L | No | | | | | |
| L | | ust file Official Forms 106J-2, <i>Ex</i> | kpenses for Separate Household | of Debtor 2. | | |
| - | | No | | | | |
| Do not list D Debtor 2. | ebtor 1 and | Yes. Fill out this information to each dependent | for Dependent's relationshi Debtor 1 or Debtor 2 | p to Dependent's age | Does der with you | pendent live ? |
| | enses include f people other | No | | | | |
| than yourself and | t vour | Yes | | | | |
| dependents | - | _ | | | | |
| Part 2: Estir | nate Your Ongo | ing Monthly Expenses | | | | |
| _ | f a date after the l | ur bankruptcy filing date unle pankruptcy is filed. If this is a | - | | | • |
| | • | on-cash government assistan ded it on Sc <i>hedule I: Your Inco</i> | - | | | Your expenses |
| | or home ownershing the ground or lot. | ip expenses for your residence 4. | e. Include first mortgage paymer | nts and | 4. | \$800.00 |
| If not incl | uded in line 4: | | | | | |
| 4a. Real es | state taxes | | | | 4a | \$0.00 |

\$0.00

\$0.00

\$0.00

4b.

4c.

4d.

4b. Property, homeowner's, or renter's insurance

4c. Home maintenance, repair, and upkeep expenses

4d. Homeowner's association or condominium dues

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 Debtor 1 First Name
 Micole Patten
 Case number (if known)

 Last Name
 Last Name

| First Name Middle Name Last Name | | |
|--|-----|---------------|
| | | Your expenses |
| 5. Additional mortgage payments for your residence, such as home equity loans | 5. | \$0.00 |
| 6. Utilities: | | |
| 6a. Electricity, heat, natural gas | 6a. | \$200.00 |
| 6b. Water, sewer, garbage collection | 6b. | \$65.00 |
| 6c. Telephone, cell phone, Internet, satellite, and cable services | 6c. | \$200.00 |
| 6d. Other. Specify: | 6d | \$0.00 |
| 7. Food and housekeeping supplies | 7. | \$350.00 |
| 8. Childcare and children's education costs | 8. | \$0.00 |
| 9. Clothing, laundry, and dry cleaning | 9. | \$75.00 |
| 10. Personal care products and services | 10. | \$35.00 |
| 11. Medical and dental expenses | 11. | \$25.00 |
| Transportation. Include gas, maintenance, bus or train fare. Do not include car payments | 12. | \$300.00 |
| 13. Entertainment, clubs, recreation, newspapers, magazines, and books | 13. | \$0.00 |
| 14. Charitable contributions and religious donations | 14. | \$0.00 |
| 15. Insurance.Do not include insurance deducted from your pay or included in lines 4 or 20. | | |
| 15a. Life insurance | 15a | \$0.00 |
| 15b. Health insurance | 15b | \$0.00 |
| 15c. Vehicle insurance | 15c | \$100.00 |
| 15d. Other insurance. Specify: | 15d | \$0.00 |
| 16. Taxes. Do not include taxes deducted from your pay or included in lines 4 or 20. | | |
| Specify: | 16 | \$0.00 |
| 17. Installment or lease payments: | | |
| 17a. Car payments for Vehicle 1 | 17a | \$0.00 |
| 17b. Car payments for Vehicle 2 | 17b | \$0.00 |
| 17c. Other. Specify: | 17c | \$0.00 |
| 17d. Other. Specify: | 17d | \$0.00 |
| 18. Your payments of alimony, maintenance, and support that you did not report as deducted from | | \$0.00 |
| your pay on line 5, Schedule I, Your Income (Official Form 106I). | 18. | |
| 19. Other payments you make to support others who do not live with you. Specify: | 10 | #0.00 |
| 20.Other real property expenses not included in lines 4 or 5 of this form or on Schedule I: Your Income. | 19. | \$0.00 |
| 20a. Mortgages on other property | 20a | \$0.00 |
| 20b. Real estate taxes. | 20b | \$0.00 |
| 20c. Property, homeowner's, or renter's insurance | 20c | \$0.00 |
| 20d. Maintenance, repair, and upkeep expenses. | 20d | \$0.00 |
| | 200 | Ψ0.00 |

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| Fill in this infor | mation to identify your c | ase: | |
|---------------------|---------------------------|-------------|----------------------|
| Debtor 1 | Nicole | | Patten |
| | First Name | Middle Name | Last Name |
| Debtor 2 | | | |
| (Spouse, if filing) | First Name | Middle Name | Last Name |
| United States E | Bankruptcy Court for the: | Northern | District of Illinois |
| | | | (State) |
| Case number | | | |

Official Form 106Dec

Check if this is an amended filing

Declaration About an Individual Debtor's Schedules

12/15

If two married people are filing together, both are equally responsible for supplying correct information.

You must file this form whenever you file bankruptcy schedules or amended schedules. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

| Par | t 1: Sign Below | |
|-----|--|--|
| | Did you pay or agree to pay someone who is NOT an attorney to h | elp you fill out bankruptcy forms? |
| | ✓ No | |
| | Yes. Name of person | Attach Bankruptcy Petition Preparer's Notice, Declaration, and Signature (Official Form 119). |
| | | |
| | | |
| | Under penalty of perjury, I declare that I have read the summary a that they are true and correct. | and schedules filed with this declaration and |
| × | /s/ Nicole Patten | × |
| | Signature of Debtor 1 | Signature of Debtor 2 |
| | Date 1/5/2018 | Date |
| | MM/DD/YYYY | MM/DD/YYYY |

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| Fill in this in | formation to identify | your case: | | | | | |
|--------------------------------|--------------------------------|----------------------------|---|----------------|------------|----------|-----------------------------------|
| Debtor 1 | Nicole | | Patten | | | | |
| | First Name | Middl | e Name Last Nam | е | - | | |
| Debtor 2 (Spouse, if filing | g) First Name | Middl | e Name Last Nam | е | - | | |
| United State | es Bankruptcy Court fo | or the: Northern | District of Illino | is | | | |
| Case numb | er | | (Stat | e) | | | |
| (If known) | | | | | = | | |
| Officia | l Form 10 | 7 | | | | | Check if this is a amended filing |
| | | _ | for Individuals | Eilina fo | r Bankru | ntev | 04/1 |
| | | | married people are filing | | | | |
| information | n. If more space is | needed, attach a se | eparate sheet to this form | | | | |
| number (if | known). Answer e | ery question. | | | | | |
| Part 1: G | ive Details About | Your Marital Statu | us and Where You Lived | Before | | | |
| 1. What | is your current mar | ital status? | | | | | |
| | Married | | | | | | |
| | Not married | | | | | | |
| 2. Durin | w the last 2 years h | ava var livad annuh | ara athar than whom was li | | | | |
| | | ave you lived anywn | ere other than where you li | ve now? | | | |
| | No Vee I jet all of the pla | ices you lived in the l | ast 3 years. Do not include v | where you live | now | | |
| V | res. List all of the pic | ices you iived iii tile ii | ast o years. Do not include | where you live | now. | | |
| | Debtor 1: | | Dates Debtor 1 lived | Debtor 2: | | | Dates Debtor 2 lived |
| | | | there | | | | there |
| | | | | Same a | s Debtor 1 | | Same as Debtor 1 |
| | 3425 Bridle Path Dr | | | _ | | | _ |
| ī | Number Street | | From | Number Str | eet | | From |
| - | | | _ To | - | | | To |
| - | Matteson Illino City State | | - | City | State | Zip Code | |
| _ | · | · | | Same a | s Debtor 1 | | Same as Debtor 1 |
| | | | | _ | | | _ |
| Ī | Number Street | | From | Number Str | eet | | From |
| - | | | _ To | | | | To |
| <u> </u> | City State | e Zip Code | _ | City | State | Zip Code | |
| _ | , state | _F 2000 | | - 7 | | 1, 2200 | |
| | | | spouse or legal equivalent uisiana, Nevada, New Mexico | | | | |
| ✓ No | | | | | | | |
| | | out Schedule H: You | ur Codebtors (Official Form | 106H). | | | |

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| Debt | tor 1 | Nicole | Patten | | number (if known) | |
|-----------|------------------------|---|---|---|--|---|
| | | First Name Middle | e Name Last Nar | me | | |
| Part | 2: | Explain the Sources of Your Inc | come | | | |
| 4. | Fill i | you have any income from employm n the total amount of income you receiv rities. If you are filing a joint case and you No Yes. Fill in the details. | ved from all jobs and all busi | inesses, including part-time | | ars? |
| | | | Debtor 1 | | Debtor 2 | |
| | | | Sources of income Check all that apply. | Gross income (before deductions and exclusions) | Sources of income Check all that apply. | Gross income (before deductions and exclusions) |
| | | om January 1 of current year until e date you filed for bankruptcy: | Wages, commissions, bonuses, tips Operating a business | | Wages, commissions, bonuses, tips Operating a business | |
| | | or last calendar year: anuary 1 to December 31, 2017) YYYY | ✓ Wages, commissions, bonuses, tips Operating a business | \$35559.75 | Wages, commissions, bonuses, tips Operating a business | |
| | | or the calendar year before that: anuary 1 to December 31, 2016) YYYY | ✓ Wages, commissions, bonuses, tips ✓ Operating a business | \$47713.00 | Wages, commissions, bonuses, tips Operating a business | |
| | nclu oubl filing | you receive any other income during ide income regardless of whether that in ic benefit payments; pensions; rental in a joint case and you have income that each source and the gross income from No Yes. Fill in the details. | ncome is taxable. Examples of come; interest; dividends; m you received together, list it | of other income are alimony; oney collected from lawsuits only once under Debtor 1. | s; royalties; and gambling and lo | |
| | | | Debtor 1 | | Debtor 2 | |
| | | | Sources of income Describe below. | Gross income from each source (before deductions and exclusions) | Sources of income Describe below. | Gross income from each source (before deductions and exclusions) |
| | | rom January 1 of current year until ne date you filed for bankruptcy: | | | | |
| | | or last calendar year: lanuary 1 to December 31, 2017) YYYY | | | | |
| | | or the calendar year before that: danuary 1 to December 31, 2016) YYYYY | | | | |
| | | | | | | |

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Patten Debtor 1 Nicole __ Case number (if known) Middle Name First Name Last Name List Certain Payments You Made Before You Filed for Bankruptcy Part 3: 6. Are either Debtor 1's or Debtor 2's debts primarily consumer debts? No. Neither Debtor 1 nor Debtor 2 has primarily consumer debts. Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose." During the 90 days before you filed for bankruptcy, did you pay any creditor a total of \$6,425* or more? No. Go to line 7. Yes. List below each creditor to whom you paid a total of \$6,425* or more in one or more payments and the total amount you paid that creditor. Do not include payments for domestic support obligations, such as child support and alimony. Also, do not include payments to an attorney for this bankruptcy case. * Subject to adjustment on 4/01/19 and every 3 years after that for cases filed on or after the date of adjustment. Yes. Debtor 1 or Debtor 2 or both have primarily consumer debts. During the 90 days before you filed for bankruptcy, did you pay any creditor a total of \$600 or more? No. Go to line 7. Yes. List below each creditor to whom you paid a total of \$600 or more and the total amount you paid that creditor. Do not include payments for domestic support obligations, such as child support and alimony. Also, do not include payments to an attorney for this bankruptcy case. Dates of payment Total amount paid Amount you still owe Was this payment for... Mortgage Creditor's Name Car Number Street Credit card Loan repayment City State Zip Code Suppliers or vendors Other Mortgage Creditor's Name Car Number Street Credit card Loan repayment City State Zip Code Suppliers or Other Mortgage Creditor's Name Car Number Street Credit card Loan repayment City State Zip Code Suppliers or vendors

Other

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| tor 1 | 1 Nicole | | | Pat | ten | Case number | (if known) |
|--------------------|--|---|---|--|--|---|--|
| | First Name | | Middle Name | Last | t Name | | |
| Insi con age | iders include your re porations of which | elatives; an you are an or a busine | ly general partners officer, director, p ess you operate as | ; relatives of any operson in control, | general partners; part or owner of 20% or | nerships of which y more of their voting | who was an insider? You are a general partner; Is securities; and any managing The domestic support obligations, |
| ✓ | No | | | | | | |
| | Yes. List all payn | ents to a | n insider. | 5. (| T | | 5 (1) |
| | | | | Dates of payment | Total amount paid | Amount you still owe | Reason for this payment |
| | Insider's Name | | | | | | |
| | Number Street | | | | | | |
| | City | State | Zip Code | | | | |
| | Insider's Name | | <u> </u> | | | | |
| | | | | | | | |
| | Number Street | | _ | | | | |
| | City | State | Zip Code | | | | |
| insi | hin 1 year before y der? ude payments on c No Yes. List all paym | ebts guar | anteed or cosigned | d by an insider. | Total amount paid | Amount you still owe | n account of a debt that benefited an Reason for this payment Include creditor's name |
| | Insider's Name | | | | | | |
| | Number Street | | | | | | |
| | City | State | Zip Code | | | | |
| | Insider's Name | | | | | | |
| | Number Street | | | | | | |
| | | | | | | | |
| | City | State | Zip Code | | | | |

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Patten Debtor 1 Nicole Case number (if known) Middle Name First Name Last Name Part 4: Identify Legal Actions, Repossessions, and Foreclosures 9. Within 1 year before you filed for bankruptcy, were you a party in any lawsuit, court action, or administrative proceeding? List all such matters, including personal injury cases, small claims actions, divorces, collection suits, paternity actions, support or custody modifications, and contract disputes. No **V** Yes. Fill in the details. Status of the case Nature of the case Court or agency Case title Pending Court Name On appeal Case number NumberStreet Concluded City State Zip Code Case title Pending Court Name On appeal Case number NumberStreet Concluded City State Zip Code Within 1 year before you filed for bankruptcy, was any of your property repossessed, foreclosed, garnished, attached, seized, or levied? Check all that apply and fill in the details below. No. Go to line 11. Yes. Fill in the information below. Value of the Describe the property Date property Paycheck Garnishment \$0 CAPITALONE Creditor's Name Explain what happened c/o Pollack & Rosen, P.C Number Street Property was repossessed. 1825 Barrett Lakes Blvd Suite 510 Property was foreclosed. Kennesaw Georgia 30144 Property was garnished. State Zip Code Property was attached, seized, or levied. Describe the property Date Value of the property Creditor's Name Explain what happened Number Street Property was repossessed. Property was foreclosed. Property was garnished. City State Zip Code Property was attached, seized, or levied.

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| Debt | otor 1 Nicole | Patten | Case number (if known) | |
|------|--|-------------------------------|--|-----------------------|
| | First Name Middle Name | Last Name | | |
| 11. | Within 90 days before you filed for bankruptcy, did accounts or refuse to make a payment because you see the second of the secon | | bank or financial institution, set off any amo | ounts from your |
| | Yes. Fill in the details. | | | |
| | Too. I iii ii ta lo dollalle. | | | |
| | | Describe the action th | e creditor took Date action was taken | Amount |
| | Creditor's Name | | | |
| | Number Street | | | |
| | | Last 4 digits of account | number: XXXX- | |
| | City State Zip Code | | | |
| | | | | |
| 12. | Within 1 year before you filed for bankruptcy, was appointed receiver, a custodian, or another officia | | possession of an assignee for the benefit o | f creditors, a court- |
| | ✓ No | | | |
| | 블 | | | |
| | Yes | | | |
| Part | t 5: List Certain Gifts and Contributions | | | |
| 13. | Within 2 years before you filed for bankruptcy, did | I you give any gifts with a t | otal value of more than \$600 per person? | |
| | √ No | | | |
| | | | | |
| | Yes. Fill in the details for each gift. | | | |
| | Gifts with a total value of more than \$600 per person | Describe the gifts | Dates you gave the gifts | Value |
| | | | | |
| | Person to Whom You Gave the Gift | | | |
| | | | | |
| | Number Street | • | | |
| | City State Zip Code | • | | |
| | Person's relationship to you | | | |
| | —————————————————————————————————————— | | | |
| | Person to Whom You Gave the Gift | | | |
| | | - | | |
| | | | | |
| | Number Street | | | |
| | City State Zip Code | | | |
| | Person's relationship to you | | | |

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| | Nicole | Patten Case number (if know | wn) | | | | | | | |
|--------|---|---|---|------------------------|--|--|--|--|--|--|
| | First Name Middle Name | Last Name | | | | | | | | |
| | | | | | | | | | | |
| . Wi | thin 2 years before you filed for bankruptcy, di | d you give any gifts or contributions with a total value | of more than \$600 | to any charity? | | | | | | |
| | - N | | | | | | | | | |
| ✓ | No | | | | | | | | | |
| | Yes. Fill in the details for each gift or contribu | tion. | | | | | | | | |
| | Gifts or contributions to charities | Describe what you contributed | Date you | Value | | | | | | |
| | that total more than \$600 | Describe what you contributed | contributed | value | | | | | | |
| | that total more than \$600 | | Contributed | | | | | | | |
| | | | | | | | | | | |
| | Charity's Name | _ | | | | | | | | |
| | • | | | | | | | | | |
| | | | | | | | | | | |
| | Number Street | _ | | | | | | | | |
| | Number Street | | | | | | | | | |
| | City State Zip Code | _ | | | | | | | | |
| | City State Zip Code | | | | | | | | | |
| | List Certain Losses | | | | | | | | | |
| ι υ. | Liot Gortain Lococo | | | | | | | | | |
| | Yes. Fill in the details. Describe the property you lost and how the loss occurred | Describe any insurance coverage for the loss Include the amount that insurance has paid. List | Date of your loss | Value of property lost | | | | | | |
| | | pending insurance claims on line 33 of <i>Schedule</i> | | | | | | | | |
| | | A/B: Property. | | | | | | | | |
| | | | | | | | | | | |
| | | | | | | | | | | |
| art 7: | List Certain Payments or Transfers | | | | | | | | | |
| ✓ | No Yes. Fill in the details. | or credit counseling agencies for services required in your b | | | | | | | | |
| | | | | | | | | | | |
| | | Description and value of any property transferred | Date payment or transfer was made | Amount of payment | | | | | | |
| | Somrad Law Firm | transferred | or transfer was made | payment | | | | | | |
| | Semrad Law Firm | | or transfer | | | | | | | |
| | Person Who Was Paid | transferred | or transfer was made | payment | | | | | | |
| | Person Who Was Paid 11101 S. Western Avenue | transferred | or transfer was made | payment | | | | | | |
| | Person Who Was Paid | transferred | or transfer was made | payment | | | | | | |
| | Person Who Was Paid 11101 S. Western Avenue | transferred | or transfer was made | payment | | | | | | |
| | Person Who Was Paid 11101 S. Western Avenue Number Street | transferred | or transfer was made | payment | | | | | | |
| | Person Who Was Paid 11101 S. Western Avenue Number Street Chicago Illinois 60643 | transferred | or transfer was made | payment | | | | | | |
| | Person Who Was Paid 11101 S. Western Avenue Number Street | transferred | or transfer was made | payment | | | | | | |
| | Person Who Was Paid 11101 S. Western Avenue Number Street Chicago Illinois 60643 City State Zip Code | transferred | or transfer was made | payment | | | | | | |
| | Person Who Was Paid 11101 S. Western Avenue Number Street Chicago Illinois 60643 City State Zip Code Email or website address | transferred | or transfer was made | payment | | | | | | |
| | Person Who Was Paid 11101 S. Western Avenue Number Street Chicago Illinois 60643 City State Zip Code Email or website address None | transferred | or transfer was made | payment | | | | | | |
| | Person Who Was Paid 11101 S. Western Avenue Number Street Chicago Illinois 60643 City State Zip Code Email or website address | transferred | or transfer was made | payment | | | | | | |
| | Person Who Was Paid 11101 S. Western Avenue Number Street Chicago Illinois 60643 City State Zip Code Email or website address None | transferred | or transfer was made | payment | | | | | | |
| | Person Who Was Paid 11101 S. Western Avenue Number Street Chicago Illinois 60643 City State Zip Code Email or website address None | transferred | or transfer was made | payment | | | | | | |
| | Person Who Was Paid 11101 S. Western Avenue Number Street Chicago Illinois 60643 City State Zip Code Email or website address None Person Who Made the Payment, if Not You | transferred | or transfer was made | payment | | | | | | |
| | Person Who Was Paid 11101 S. Western Avenue Number Street Chicago Illinois 60643 City State Zip Code Email or website address None Person Who Made the Payment, if Not You | transferred | or transfer was made | payment | | | | | | |
| | Person Who Was Paid 11101 S. Western Avenue Number Street Chicago Illinois 60643 City State Zip Code Email or website address None Person Who Made the Payment, if Not You Person Who Was Paid | transferred | or transfer was made | payment | | | | | | |
| | Person Who Was Paid 11101 S. Western Avenue Number Street Chicago Illinois 60643 City State Zip Code Email or website address None Person Who Made the Payment, if Not You Person Who Was Paid | transferred | or transfer was made | payment | | | | | | |
| | Person Who Was Paid 11101 S. Western Avenue Number Street Chicago Illinois 60643 City State Zip Code Email or website address None Person Who Made the Payment, if Not You Person Who Was Paid Number Street | transferred | or transfer was made | payment | | | | | | |
| | Person Who Was Paid 11101 S. Western Avenue Number Street Chicago Illinois 60643 City State Zip Code Email or website address None Person Who Made the Payment, if Not You Person Who Was Paid | transferred | or transfer was made | payment | | | | | | |
| | Person Who Was Paid 11101 S. Western Avenue Number Street Chicago Illinois 60643 City State Zip Code Email or website address None Person Who Made the Payment, if Not You Person Who Was Paid Number Street City State Zip Code | transferred | or transfer was made | payment | | | | | | |
| | Person Who Was Paid 11101 S. Western Avenue Number Street Chicago Illinois 60643 City State Zip Code Email or website address None Person Who Made the Payment, if Not You Person Who Was Paid Number Street | transferred | or transfer was made | payment | | | | | | |
| | Person Who Was Paid 11101 S. Western Avenue Number Street Chicago Illinois 60643 City State Zip Code Email or website address None Person Who Made the Payment, if Not You Person Who Was Paid Number Street City State Zip Code | transferred | or transfer was made | payment | | | | | | |

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| Debto | or 1 Nicole | Patten | Case number (if known) | |
|-------|--|---|--|------------------------------|
| | First Name Middle Name | Last Name | | |
| | Within 1 year before you filed for bankruptcy, dinelp you deal with your creditors or to make pay Do not include any payment or transfer that you listed | yments to your creditors? | ehalf pay or transfer any property to any | one who promised to |
| | No Yes. Fill in the details. | | | |
| | Tes. I iii ii i ii de details. | Decembring and value of any ma | Data . | |
| | | Description and value of any pr transferred | operty Date A payment or transfer was made | Amount of payment |
| | Person Who Was Paid | _ | | |
| | Number Street | _ | | |
| | City State Zip Code | _ | | |
| | Include both outright transfers and transfers made a and transfers that you have already listed on this sta No Yes. Fill in the details. | | urity interest or mortgage on your property). | Do not include gifts |
| ' | _ | Description and value of proper transferred | rty Describe any property or payments received or debts paid in exchange | Date transfer was made |
| | Person Who Received Transfer | _ | | |
| | Number Street | _ | | |
| | City State Zip Code Person's relationship to you | _ | | |
| | Person Who Received Transfer | _ | | |
| | Number Street | _ | | |
| | City State Zip Code Person's relationship to you | _ | | |
| | Within 10 years before you filed for bankruptcy, beneficiary? (These are often called asset-protection devices.) | did you transfer any property to a self | i-settled trust or similar device of which | you are a |
| | ✓ No | | | |
| | Yes. Fill in the details. | | | |
| | | Description and value of the p | property transferred | Date transfer was made |
| | Name of trust | | | |

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Patten Debtor 1 Nicole Case number (if known) Middle Name First Name Last Name List Certain Financial Accounts, Instruments, Safe Deposit Boxes, and Storage Units Part 8: 20. Within 1 year before you filed for bankruptcy, were any financial accounts or instruments held in your name, or for your benefit, closed, sold, moved, or transferred? Include checking, savings, money market, or other financial accounts; certificates of deposit; shares in banks, credit unions, brokerage houses, pension funds, cooperatives, associations, and other financial institutions. Yes. Fill in the details. Last 4 digits of account Type of account or Date Last balance account was before number instrument closed, sold, closing or moved, or transfer transferred XXXX-Checking Person Who Was Paid Savings Number Street Money market Brokerage Other City State Zip Code XXXX-Checking Person Who Was Paid Savings Number Street Money market Brokerage Other City State Zip Code Do you now have, or did you have within 1 year before you filed for bankruptcy, any safe deposit box or other depository for securities, cash, or other valuables? Yes. Fill in the details. Who else had access to it? Describe the contents Do you still have it? No Name of Financial Institution Name Yes Number Street Number Street City State Zip Code City Zip Code State 22. Have you stored property in a storage unit or place other than your home within 1 year before you filed for bankruptcy? Yes. Fill in the details. Do you still Who else had access to it? Describe the contents have it? No Name of Storage Facility Name Number Street Street Number City State Zip Code City State Zip Code

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Patten Debtor 1 Nicole Case number (if known) Middle Name Part 9: Identify Property You Hold or Control for Someone Else 23. Do you hold or control any property that someone else owns? Include any property you borrowed from, are storing for, or hold in trust for someone. Yes. Fill in the details. Where is the property? Describe the contents Value Owner's Name **NumberStreet** Number Street City State Zip Code City State Zip Code Part 10: **Give Details About Environmental Information** For the purpose of Part 10, the following definitions apply: ■ Environmental law means any federal, state, or local statute or regulation concerning pollution, contamination, releases of hazardous or toxic substances, wastes, or material into the air, land, soil, surface water, groundwater, or other medium, including statutes or regulations controlling the cleanup of these substances, wastes, or material. Site means any location, facility, or property as defined under any environmental law, whether you now own, operate, or utilize it or used to own, operate, or utilize it, including disposal sites. Hazardous material means anything an environmental law defines as a hazardous waste, hazardous substance, toxic substance, hazardous material, pollutant, contaminant, or similar term. Report all notices, releases, and proceedings that you know about, regardless of when they occurred. 24. Has any governmental unit notified you that you may be liable or potentially liable under or in violation of an environmental law? Yes. Fill in the details. Governmental unit Environmental law, if you know it Date of notice Name of site Governmental unit Number Street Number Street City State Zip Code City State Zip Code 25. Have you notified any governmental unit of any release of hazardous material? Yes. Fill in the details. Governmental unit Environmental law, if you know it Date of notice Name of site Governmental unit Number Street NumberStreet City State Zip Code City State Zip Code

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| Deb | tor 1 | Nicole | | | Pa | itten | Cas | se number <i>(ii</i> | known) | | |
|------|----------|---|--|--------------------------------------|---------------|-----------------|-------------------|----------------------|---------------|-----------------|----------------------------------|
| | | First Name | | Middle Name | La | st Name | | | | | <u> </u> |
| 26. | Hav | e you been a part | y in any judic | ial or administr | ative proce | eding under | any environmer | ntal law? In | clude settler | nents and ord | ers. |
| | П | Yes. Fill in the def | tails. | | | | | | | | |
| | | | | | Court or ag | ency | | Nature | of the case | | Status of the case |
| | | Case title | | | | | | | | | Pending |
| | | | | | Court Name | | | | | | On appeal |
| | | Case number | | | NumberStre | et | | | | | Concluded |
| | | _ | | | City | State | Zip Code | | | | |
| Part | 11: | Give Details Al | oout Your E | Susiness or Co | nnections | to Any Bu | siness | | | | |
| 27. | With | nin 4 years before | you filed for | bankruptcy, dic | l you own a | business or | have any of the | following c | onnections t | o any busines | s? |
| | | A member of A partner in a An officer, di | f a limited liab a partnership rector, or ma | nility company (L naging executiv | LC) or limite | ed liability pa | | full-time or p | oart-time | | |
| | | An owner of | at least 5% c | f the voting or e | quity securi | ties of a corp | ooration | | | | |
| | V | No. None of the a | above applie | s. Go to Part 12 | | | | | | | |
| | H | Yes. Check all that | | | | w for each h | ousiness. | | | | |
| | ш | 100. Oncor all th | at apply abo | | | | re of the busine | | Employer I | doutification . | mhar Da nat |
| | | | | | Desci | ibe the natt | ire of the busine | :55 | | | number Do not number or ITIN. |
| | | | | | | | | | EIN: | | |
| | | Business Name | | | _ | | | | LIIV. | | |
| | | Number Street | | | Name | of account | ant or bookkeep | per | Dates busi | ness existed | |
| | | City | State | Zip Code | | | | | From | To | |
| | | | | | Desci | ribe the natu | ure of the busine | ess | | | number Do not number or ITIN. |
| | | Business Name | | | _ | | | | EIN: | | |
| | | Number Street | | | _ | | | | Dates bus | ness existed | |
| | | Number Street | | | Name | of account | ant or bookkeep | per | Dates busi | iless existed | |
| | | City | State | Zip Code | _ | | | | From | To | |
| | | | | | Desci | ibe the natu | re of the busine | ess | Employer I | dentification r | number Do not |
| | | | | | 20301 | oo nate | | | include So | | number or ITIN. |
| | | Business Name | | | _ | | | | EIN: | | |
| | | Number Street | | | _ | | | | Dates busi | ness existed | |
| | | City | Ctata | 7in () - | Name | of account | ant or bookkeep | per | _ | _ | |
| | | City | State | Zip Code | | | | | From | To | |
| | | | | | | | | | | | |
| | | | | | | | | | | | |

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| Debt | tor 1 | Nicole | | | Patten | Case number (if known) |
|------|--------|---|-------------------------------|--|-------------------------------|---|
| | | First Name | | Middle Name | Last Name | |
| 28. | | hin 2 years before golditors, or other par No Yes. Fill in the deta | rties. | bankruptcy, did yo | u give a financial stateme | nt to anyone about your business? Include all financial institutions, |
| | ш | | | | Date issued | |
| | | | | | Date issued | |
| | | Name | | | MM/DD/YYYY | |
| | | - | | | | |
| | | Number Street | | | | |
| | | City | State | Zip Code | | |
| | | • Oity | Otate | Zip Gode | | |
| Part | 12: | Sign Below | | | | |
| t | rue a | and correct. I unde kruptcy case can | erstand that result in fin | making a false stat es up to \$250,000, o | ement, concealing proper | ents, and I declare under penalty of perjury that the answers are ty, or obtaining money or property by fraud in connection with 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571. |
| | | /S/ I | Nicole Pattenure of Debtor | | | Signature of Debtor 2 |
| | | Signate | ile of Debtor | | | Date |
| | | Date - | 1/5/2018 | | | Date |
| | Did yo | ou attach addition | al pages to | Your Statement of I | Financial Affairs for Individ | uals Filing for Bankruptcy (Official Form 107)? |
| | - N | lo | | | | |
| | ☱ . | | | | | |
| L | ' | 'es | | | | |
| | Did yo | ou pay or agree to | pay someo | ne who is not an att | orney to help you fill out b | ankruptcy forms? |
| Į. | V N | lo | | | | |
| Ì | = Y | es. Name of person | 1 | | | Attach the Bankruptcy Petition Preparer's Notice, Declaration, and Signature (Official Form 119). |

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| Fill in this information to identify your case: | | | | | | | |
|---|---------------------------|-------------|------------------------------|--|--|--|--|
| Debtor 1 | Nicole | Patten | | | | | |
| | First Name | Middle Name | Last Name | | | | |
| Debtor 2 | | | | | | | |
| (Spouse, if filing) | First Name | Middle Name | Last Name | | | | |
| United States E | Bankruptcy Court for the: | Northern | District of Illinois (State) | | | | |
| Case number (If known) | | | (State) | | | | |

Check if this is an amended filing

Official Form 108

Statement of Intention for Individuals Filing Under Chapter 7

12/15

If you are an individual filing under chapter 7, you must fill out this form if:

- creditors have claims secured by your property, or
- you have leased personal property and the lease has not expired.

You must file this form with the court within 30 days after you file your bankruptcy petition or by the date set for the meeting of creditors, whichever is earlier, unless the court extends the time for cause. You must also send copies to the creditors and lessors you list on the form.

If two married people are filing together in a joint case, both are equally responsible for supplying correct information. Both debtors must sign and date the form.

Be as complete and accurate as possible. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known).

Part 1: List Your Creditors Who Have Secured Claims For any creditors that you listed in Part 1 of Schedule D: Creditors Who Have Claims Secured by Property (Official Form 106D), fill in the information below. Did you claim the property Identify the creditor and the property that is collateral What do you intend to do with the property that secures a debt? as exempt on Schedule C? Surrender the property. Creditor's name: Santander Consumer USA Retain the property and redeem it. Yes Description of Retain the property and enter into a property Reaffirmation Agreement. securing debt: 2013 Nissan Sentra Retain the property and [explain]: Creditor's Surrender the property. No. name: Sears Yes. Retain the property and redeem it. Description of Retain the property and enter into a property Reaffirmation Agréement. securing debt: Snowblower Lease Retain the property and [explain]: No. Surrender the property. Creditor's name: Yes. Retain the property and redeem it. Description of Retain the property and enter into a property Reaffirmation Agreement. securing debt: Retain the property and [explain]: No. Creditor's Surrender the property. name: Yes Retain the property and redeem it. Description of Retain the property and enter into a property Reaffirmation Agréement. securing debt: Retain the property and [explain]:

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| Debtor | Nicole | | Patten | Case number (if | |
|---------|--------------------------------|--------------------------|-----------------------------|---|--|
| 1 | First Name | Middle Name | Last Name | known) | |
| Part 2: | List Your Unexpired Person | onal Property Leases | | | |
| informa | | ate leases. Unexpired le | ases are leases that are st | ntracts and Unexpired Leases (Official Form 106G), fill in the still in effect; the lease period has not yet ended. You may C. § 365(p)(2). | |
| Des | scribe your unexpired personal | property leases | | Will the lease be assumed? | |
| Les | sor's name: | | | □ No □ Yes | |
| | cription of leased perty: | | | | |
| Les | sor's name: | | | □ No □ Yes | |
| | cription of leased perty: | | | | |
| Les | sor's name: | | | □ No □ Yes | |
| | cription of leased perty: | | | _ | |
| Les | sor's name: | | | No Yes | |
| | cription of leased perty: | | | | |
| Les | sor's name: | | | □ No □ Yes | |
| | cription of leased perty: | | | | |
| Les | sor's name: | | | □ No □ Yes | |
| | cription of leased perty: | | | | |
| Les | sor's name: | | | □ No □ Yes | |
| | cription of leased perty: | | | | |
| Part 3: | Sign Below | | | | |
| Unde | | | intention about any prope | erty of my estate that secures a debt and any personal | |
| _ | /s/ Nicole Patten | | Signatur | ro of Dobtor 2 | |
| SI | gnature of Debtor 1 | | Signature | re of Debtor 2 | |
| D | ate 1/5/2018 MM/DD/YYYY | | Date M | IM/DD/YYYY | |

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B2030 (Form 2030) (12/15)

UNITED STATES BANKRUPTCY COURT

| | | Northern Dist | trict of Illinois | | |
|--------------|--|--|---------------------------------|------------------------|--------------------|
| In re | Nicole Patten | | Case N | lo | |
| | Debtor | | | (If k | (nown) |
| | | | Chapte | er Cha | pter 7 |
| | ISCLOSURE C | F COMPENSATION | ON OF ATTORN | IEY FOR DE | BTOR |
| compe | ensation paid to me within | and Fed. Bankr. P. 2016(b), I ce one year before the filing of the chalf of the debtor(s) in contern | ne petition in bankruptcy, or | agreed to be paid to r | me, for services |
| For le | gal services, I have agreed | to accept | | | \$1,765.00 |
| Prior t | o the filing of this stateme | nt I have received | | | \$0.00 |
| Baland | ce Due | | | | \$1,765.00 |
| 2. The so | ource of the compensation | paid to me was: | | | |
| | ✓ Debtor | Other (specif | fy) | | |
| 3. The so | ource of the compensation | paid to me is: | | | |
| | ✓ Debtor | Other (specif | fy) | | |
| | nave not agreed to share the embers and associates of | ne above-disclosed compensat my law firm. | tion with any other person u | inless they are | |
| └ ─ m | | pove-disclosed compensation by law firm. A copy of the agree mpensation, is attached. | | | |
| 5. In retu | ırn for the above-disclosed | d fee, I have agreed to render le | egal service for all aspects of | the bankruptcy case, | including: |
| a | . Analysis of the debtor's bankruptcy; | financial situation, and renderii | ng advice to the debtor in de | etermining whether to | file a petition in |
| b | . Preparation and filing of | any petition, schedules, staten | ments of affairs and plan wh | ich may be required; | |
| С | . Representation of the de | btor at the meeting of creditors | s and confirmation hearing, | and any adjourned he | earings thereof; |
| 6. By agı | reement with the debtor(s) | , the above-disclosed fee does | not include the following se | ervices: | |
| | | | | | |
| | | CERTIF | ICATION | | |
| | that the foregoing is a cor this bankruptcy proceedir | nplete statement of any agreen ngs. | nent or arrangement for pay | ment to me for repres | entation of the |
| | 1/5/2018 | | /s/ Brittney Mans | field | |
| | Date | | Signature of Attorr | пеу | |
| | | | Semrad Law Firr | n | |
| | | | Name of law firm | n | |

Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy (Form 2010)

This notice is for you if:

You are an individual filing for bankruptcy,

and

Your debts are primarily consumer debts.

Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose."

The types of bankruptcy that are available to individuals

Individuals who meet the qualifications may file under one of four different chapters of the Bankruptcy Code:

- Chapter 7 Liquidation
- Chapter 11 Reorganization
- Chapter 12 Voluntary repayment plan for family farmers or fishermen
- Chapter 13 Voluntary repayment plan for individuals with regular income

You should have an attorney review your decision to file for bankruptcy and the choice of chapter.

Chapter 7: Liquidation

| | \$245 | filing fee |
|---|-------|--------------------|
| | \$75 | administrative fee |
| + | \$15 | trustee surcharge |
| | \$335 | total fee |

Chapter 7 is for individuals who have financial difficulty preventing them from paying their debts and who are willing to allow their nonexempt property to be used to pay their creditors. The primary purpose of filing under chapter 7 is to have your debts discharged. The bankruptcy discharge relieves you after bankruptcy from having to pay many of your pre-bankruptcy debts. Exceptions exist for particular debts, and liens on property may still be enforced after discharge. For example, a creditor may have the right to foreclose a home mortgage or repossess an automobile.

However, if the court finds that you have committed certain kinds of improper conduct described in the Bankruptcy Code, the court may deny your discharge.

You should know that even if you file chapter 7 and you receive a discharge, some debts are not discharged under the law. Therefore, you may still be responsible to pay:

- most taxes;
- most student loans;
- domestic support and property settlement obligations;

- most fines, penalties, forfeitures, and criminal restitution obligations; and
- certain debts that are not listed in your bankruptcy papers.

You may also be required to pay debts arising from:

- fraud or theft;
- fraud or defalcation while acting in breach of fiduciary capacity;
- intentional injuries that you inflicted; and
- death or personal injury caused by operating a motor vehicle, vessel, or aircraft while intoxicated from alcohol or drugs.

If your debts are primarily consumer debts, the court can dismiss your chapter 7 case if it finds that you have enough income to repay creditors a certain amount. You must file *Chapter 7 Statement of Your Current Monthly Income* (Official Form 122A-1) if you are an individual filing for bankruptcy under chapter 7. This form will determine your current monthly income and compare whether your income is more than the median income that applies in your state.

If your income is not above the median for your state, you will not have to complete the other chapter 7 form, the *Chapter 7 Means Test Calculation* (Official Form 122A-2).

If your income is above the median for your state, you must file a second form - the *Chapter 7 Means Test Calculation* (Official Form 122A-2). The calculations on the form - sometimes called the *Means Test* - deduct from your income living expenses and payments on certain debts to determine any amount available to pay unsecured creditors. If

your income is more than the median income for your state of residence and family size, depending on the results of the *Means Test*, the U.S. trustee, bankruptcy administrator, or creditors can file a motion to dismiss your case under § 707(b) of the Bankruptcy Code. If a motion is filed, the court will decide if your case should be dismissed. To avoid dismissal, you may choose to proceed under another chapter of the Bankruptcy Code.

If you are an individual filing for chapter 7 bankruptcy, the trustee may sell your property to pay your debts, subject to your right to exempt the property or a portion of the proceeds from the sale of the property. The property, and the proceeds from property that your bankruptcy trustee sells or liquidates that you are entitled to, is called *exempt property*. Exemptions may enable you to keep your home, a car, clothing, and household items or to receive some of the proceeds if the property is sold.

Exemptions are not automatic. To exempt property, you must list it on *Schedule C: The Property You Claim as Exempt* (Official Form 106C). If you do not list the property, the trustee may sell it and pay all of the proceeds to your creditors.

Chapter 11: Reorganization

| | \$1,167 | filing fee |
|---|---------|--------------------|
| + | \$550 | administrative fee |
| | \$1,717 | total fee |

Chapter 11 is often used for reorganizing a business, but is also available to individuals. The provisions of chapter 11 are too complicated to summarize briefly.

Read These Important Warnings

Because bankruptcy can have serious long-term financial and legal consequences, including loss of your property, you should hire an attorney and carefully consider all of your options before you file. Only an attorney can give you legal advice about what can happen as a result of filing for bankruptcy and what your options are. If you do file for bankruptcy, an attorney can help you fill out the forms properly and protect you, your family, your home, and your possessions.

Although the law allows you to represent yourself in bankruptcy court, you should understand that many people find it difficult to represent themselves successfully. The rules are technical, and a mistake or inaction may harm you. If you file without an attorney, you are still responsible for knowing and following all of the legal requirements.

You should not file for bankruptcy if you are not eligible to file or if you do not intend to file the necessary documents.

Bankruptcy fraud is a serious crime; you could be fined and imprisoned if you commit fraud in your bankruptcy case. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

Chapter 12: Repayment plan for family farmers or fishermen

| | \$200 | filing fee |
|---|-------|--------------------|
| + | \$75 | administrative fee |
| | \$275 | total fee |

Similar to chapter 13, chapter 12 permits family farmers and fishermen to repay their debts over a period of time using future earnings and to discharge some debts that are not paid.

Chapter 13: Repayment plan for individuals with regular income

| | \$235 | filing fee |
|---|-------|--------------------|
| + | \$75 | administrative fee |
| | \$310 | total fee |

Chapter 13 is for individuals who have regular income and would like to pay all or part of their debts in installments over a period of time and to discharge some debts that are not paid. You are eligible for chapter 13 only if your debts are not more than certain dollar amounts set forth in 11 U.S.C. § 109.

Under chapter 13, you must file with the court a plan to repay your creditors all or part of the money that you owe them, usually using your future earnings. If the court approves your plan, the court will allow you to repay your debts, as adjusted by the plan, within 3 years or 5 years, depending on your income and other factors.

After you make all the payments under your plan, many of your debts are discharged. The debts that are not discharged and that you may still be responsible to pay include:

- domestic support obligations,
- most student loans,
- certain taxes.
- debts for fraud or theft,
- debts for fraud or defalcation while acting in a fiduciary capacity,
- most criminal fines and restitution obligations,
- certain debts that are not listed in your bankruptcy papers,
- certain debts for acts that caused death or personal injury, and
- certain long-term secured debts.

Warning: File Your Forms on Time

Section 521(a)(1) of the Bankruptcy Code requires that you promptly file detailed information about your creditors, assets, liabilities, income, expenses and general financial condition. The court may dismiss your bankruptcy case if you do not file this information within the deadlines set by the Bankruptcy Code, the Bankruptcy Rules, and the local rules of the court

For more information about the documents and their deadlines, go to:

http://www.uscourts.gov/bkforms/bankruptcy_forms.html#procedure.

Bankruptcy crimes have serious consequences

- If you knowingly and fraudulently conceal assets or make a false oath or statement under penalty of perjury either orally or in writing in connection with a bankruptcy case, you may be fined, imprisoned, or both.
- All information you supply in connection with a bankruptcy case is subject to examination by the Attorney General acting through the Office of the U.S. Trustee, the Office of the U.S. Attorney, and other offices and employees of the U.S. Department of Justice.

Make sure the court has your mailing address

The bankruptcy court sends notices to the mailing address you list on *Voluntary Petition for Individuals Filing for Bankruptcy* (Official Form 101). To ensure that you receive information about your case, Bankruptcy Rule 4002 requires that you notify the court of any changes in your address.

A married couple may file a bankruptcy case together - called a *joint case*. If you file a joint case and each spouse lists the same mailing address on the bankruptcy petition, the bankruptcy court generally will mail you and your spouse one copy of each notice, unless you file a statement with the court asking that each spouse receive separate copies.

Understand which services you could receive from credit counseling agencies

The law generally requires that you receive a credit counseling briefing from an approved credit counseling agency. 11 U.S.C. § 109(h). If you are filing a joint case, both spouses must receive the briefing. With limited exceptions, you must receive it within the 180 days **before** you file your bankruptcy petition. This briefing is usually conducted by telephone or on the Internet.

In addition, after filing a bankruptcy case, you generally must complete a financial management instructional course before you can receive a discharge. If you are filing a joint case, both spouses must complete the course.

You can obtain the list of agencies approved to provide both the briefing and the instructional course from: http://www.justice.gov/ust/eo/hapcpa/ccde/cc_approved.html

In Alabama and North Carolina, go to:
http://www.uscourts.gov/FederalCourts/Bankruptcy/BankruptcyResources/ApprovedCredit
20AndDebtCounselors.aspx

If you do not have access to a computer, the clerk of the bankruptcy court may be able to help you obtain the list.

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UNITED STATES BANKRUPTCY COURT

Northern District of Illinois

| In re: | Patten, Nicole | Case No | |
|-----------------|----------------|--|-------------------------------------|
| | Debtor(s) | 0000 110. | |
| | | Chapter. | Chapter7 |
| | VERIF | ICATION OF CREDITOR MAT | RIX |
| Th knowledge | | ify that the attached list of creditors is tru | ue and correct to the best of their |
| Date: | 1/5/2018 | /s/ Patten, Nicole | , |
| | | Patten, Nicole Signature of Deb | otor |

Santander Consumer USA ATT POC: Janiscia Jackson PO Box 961245 Fort Worth, TX, 76161

DEPT OF ED/NAVIENT PO BOX 9635 WILKES BARRE, PA, 18773

CAPITALONE c/o Pollack & Rosen, P.C 1825 Barrett Lakes Blvd Suite 510 Kennesaw, GA, 30144

COMENITY BANK/CARSONS 1314 PINELOG ROAD AIKEN, SC, 29803

Great American Finance 20 N Wacker Dr, Ste 2275 Chicago, IL, 60606

MERRICK BANK CORP PO Box 10368 c/o Susan Gaines Greenville, SC, 29603

CREDIT ONE BANK NA PO BOX 98875 LAS VEGAS, NV, 89193

CONVERGENT OUTSOURCING 10750 HAMMERLY BLVD #200 Houston, TX, 77043

Sears P.O. Box 960090 Orlando, FL, 32896-0090

Check N Go 2116 W Jefferson St Joliet, IL, 60435

Health Lab 25 North Windfield Road Winfield, IL, 60190 high Tech Medical Park 0236 Momentum Place Chicago, IL, 60689

Franciscan Alliance PO Box 3475 Toledo, OH, 43607

The Receivable Management Services Corporation 1250 E Diehl Rd Ste 300 PO Box 3099 Naperville, IL, 60563

Ingalls Memorial Hospital 27685 Network Place Chicago, IL, 60673 Case 18-00298 Doc 1 Filed 01/05/18 Entered 01/05/18 11:50:39 Desc Main Document Page 64 of 71

CONTRACT FOR LEGAL SERVICES FOR REPRESENTATION IN A CHAPTER 7 BANKRUPTCY CASE

I do hereby retain the law firm of The Semrad Law Firm, LLC to represent my legal interests solely in a Bankruptcy case filed under Chapter 7 of the United States Bankruptcy Code. I further understand that this representation DOES NOT INCLUDE defending my interests in any adversary proceeding filed against me nor does this representation cover state court proceedings or criminal litigation.

I understand that The Semrad Law Firm, LLC is not going to charge me for time spent prior to the filing of my Chapter 7 case preparing and filing my petition. I also understand that The Semrad Law Firm, LLC may incur costs for such items as credit reports and tax transcripts for which it will not seek reimbursement.

After the bankruptcy case is filed, I understand that I will be presented with a second retainer agreement to pay The Semrad Law Firm, LLC \$1765.00

attorney fees plus any necessary post-petition costs to represent my interests including preparation and amendment, if necessary, of schedules; preparation and attendance of the Section 341 Meeting of Creditors; review and attendance, if necessary, to motions for stay relief; review of any redemption agreements; review of any reaffirmation agreements; case administration and monitoring, motions to reopen, if necessary, as well as a post discharge review of my credit report to ensure accurate reporting. I further understand and agree that additional professional legal services will result in additional fees that are due The Semrad Law Firm, LLC. Some of the additional services and fees are as follows:

Representation in an Adversary Proceeding. \$350.00/hr. Adding additional bills \$31.00 Motion to Reopen and Avoid Lien \$1000.00

or

I have been presented to two options regarding the filing fees of \$335.00 payable to the Bankruptcy Court. I have elected to either,

- 1. Pay the costs directly to the bankruptcy court either all at once, or apply to pay these costs in installments;
- 2. Request that the firm pay these costs on my behalf after filing for which it will seek reimbursement from me.

I understand that once my bankruptcy is filed, I will not be legally obligated to pay any fees to The Semrad Law Firm, LLC. If any fees are owed to The Semrad Law Firm, LLC and not paid as of the filing of the bankruptcy, they will be discharged in the bankruptcy and may not be collected by The Semrad Law Firm, LLC or it assignees. After my bankruptcy is filed, I may sign a second retainer agreement promising to pay fees for the remainder of my representation in consideration of services to be performed by The Semrad Law Firm, LLC after the filing of my bankruptcy. I understand that I will be under no obligation to do so and can refuse to sign such an agreement. However, The Semrad Law Firm, LLC reserves the right to withdraw from my representation in the event that I do not sign a second retainer within 10 days after the filing of my case. I have been advised that I have a right to consult other counsel before I sign the second retainer. Further, if I do not wish for The Semrad Law Firm, LLC to represent me, I always have the right to seek any other legal counsel.

I further understand that the fee to be paid pursuant to the terms of this Contract is a flat fee, and that this fee shall immediately become the property of The Semrad Law Firm, LLC, in exchange for a commitment by The Semrad Law Firm, LLC, to provide the legal services described above. Said funds will be deposited into the main bank account owned by The Semrad Law Firm, LLC, and will be used for general expenses of the firm.

As The Semrad Law Firm, LLC has duties to me as its client, I likewise have responsibilities. I agree to fully cooperate with The Semrad Law Firm, LLC This includes, but is not limited to, providing The Semrad Law Firm, LLC with all information necessary and related to my bankruptcy case. In addition, I must attend all scheduled Court hearings and meetings.

I understand that I am to notify my creditors of my bankruptcy case once my Chapter 7 case is filed. I understand that The Semrad Law Firm, LLC is not liable or responsible for any illegal collection actions taken by my creditors once my case is filed.

I also understand that, if I am filing a joint case, the use of the personal pronouns "I", "me" or "my" are binding upon each signatory individually. I also understand that the laws of the State of Illinois are applicable to enforcement of this contract. Moreover, any change in this Contract is null and void unless it is in writing and signed by The Semrad Law Firm, LLC or an agent thereof.

Date: 01/05/2018

Client _____ Client _____

Attorney Butterey Mansbuld

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| Debtor 1 Nicole First Name | | Patten Case numb | er (if known) |
|--|--|---|---|
| · · · · · · · · · · · · · · · · · · · | Middle Name uestions for Reporting Purposes | Last Name | |
| 16. What kind of debts do | 16a. Are your debts primarily | | bts are defined in 11 U.S.C. § 101(8) as |
| you have? | No. Go to line 16b. | printing for a personal, farmly, or | mouseriola parpose. |
| mount appropriation | Yes. Go to line 17. | | |
| and advantage of a second and a | 16b. Are your debts primarily | business debts? Business debts | are debts that you incurred to obtain |
| Wilderson & Parkerson | money for a business or in No. Go to line 16c. | nvestment or through the operatio | on of the business or investment. |
| AND STANDARD | Yes. Go to line 17. | | |
| Veneze and a second sec | s or business debts. | | |
| | | | |
| 17. Are you filing under Chapter 7? | No. I am not filing under Chap | oter 7. Go to line 18. | - |
| Do you estimate that after any exempt property is excluded | Yes. I am filing under Chapter expenses are paid that fu | 7. Do you estimate that after any execunds will be available to distribute to u | mpt property is excluded and administrative unsecured creditors? |
| and administrative | ✓ No. | | |
| expenses are paid that | Yes. | | |
| funds will be available for distribution to | | | |
| unsecured creditors? | | | |
| ^{18.} How many creditors | ☑ 1-49 | 1,000-5,000 | 25,001-50,000 |
| do you estimate that | 50-99 | 5,001-10,000 | 50,001-100,000 |
| you owe? | 100-199 200-999 | 10,001-25,000 | ☐ More than 100,000 |
| 10 Hamman | □ \$0-\$50,000 | \$1,000,001-\$10 million | T \$500,000,001 \$1 billion |
| 19. How much do you estimate your assets | \$50,001-\$100,000 | \$10,000,001-\$50 million | \$500,000,001-\$1 billion \$1,000,000,001-\$10 billion |
| to be worth? | \$100,001-\$500,000 | \$50,000,001-\$100 millio | |
| and a first control of the state and resonant resonant resonant representations of the state of the state of the | \$500,001-\$1 million | \$100,000,001-\$500 mill | lion More than \$50 billion |
| ^{20.} How much do you | \$0-\$50,000 | \$1,000,001-\$10 million | \$500,000,001-\$1 billion |
| estimate your liabilities to be? | \$50,001-\$100,000 | \$10,000,001-\$50 million | , ,, |
| nabilities to be ; | \$100,001-\$500,000 \$500,001-\$1 million | \$50,000,001-\$100 million \$100,000,001-\$500 million | |
| Part 7: Sign Below | \$555,557 \$771mmon | \$100,000,001-\$30011## | ion More than \$50 billion |
| For you | I have examined this petition, and | d I declare under penalty of periun | y that the information provided is true and |
| 1 or you | correct. | | |
| | If I have chosen to file under Cha | apter 7, I am aware that I may proce | eed, if eligible, under Chapter 7, 11,12, or 13 |
| | under Chapter 7. | understand the relief available und | der each chapter, and I choose to proceed |
| | | I did not pay or agree to pay some | eone who is not an attorney to help me fill |
| | out this document, I have obtained | ed and read the notice required by | 11 U.S.C. § 342(b). |
| | | | ates Code, specified in this petition. |
| | understand making a false state | ment, concealing property, or obtains can result in fines up to \$250.0 | aining money or property by fraud in 100, or imprisonment for up to 20 years, or |
| | both. 18 U.S.C. §§ 152, 1341, 15 | 519, and 3571. | oo, or impresonment for up to 20 years, or |
| | * | * | |
| | /s/ Nicole Patten Signature of Debtor 1 | | ture of Debtor 2 |
| | Executed on1/5/2018 | _ | |
| (1 5500 February 1 4 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 | MM / DD / | YYYY | uted on |

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| Fill in this infor | Fill in this information to identify your case: | | | | | | | | |
|---------------------------------|---|--|------------------------------|--|--|--|--|--|--|
| Debtor 1 | Nicole | The sector action is the sector and the sector action is the sector action in the sector action in the sector action is the sector action in the sector action in the sector action is the sector action in the sector action in the sector action is the sector action in the sector action in the sector action is the sector action in the sector action in the sector action is the sector action in the sector action in the sector action is the sector action in the sector action in the sector action is the sector action in the sector action in the sector action is the sector action in the sector action in the sector action is the sector action in the sector action in the sector action is the sector action in the sector action in the sector action is the sector action in the sector action in the sector action is the sector action in the sector action in the sector action is the sector action in the sector action in the sector action is the sector action in the sector action in the sector action is sector action in the sector action in the sector action is sector action in the sector action in the sector action is sector action in the sector action in the sector action is sector action in the sector action in the sector action is sector action action in the sector action in the sector action is sector action action in the sector action action is sector action action action action in the sector action acti | Patten | Parking sold and a second seco | | | | | |
| Property of the | First Name | Middle Name | Last Name | | | | | | |
| Debtor 2 (Spouse, if filing) | First Name | Middle Name | Last Name | | | | | | |
| | | | | | | | | | |
| United States E | Bankruptcy Court for the: | Northern | District of Illinois (State) | | | | | | |
| Case number (If known) | | | | | | | | | |

Official Form 106Dec

Check if this is an amended filing

Declaration About an Individual Debtor's Schedules

12/15

If two married people are filing together, both are equally responsible for supplying correct information.

You must file this form whenever you file bankruptcy schedules or amended schedules. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

| Par | t 1: Sign Below | | | | | | | | |
|--|---|---|--|--|--|--|--|--|--|
| | Did you pay or agree to pay someone who is NOT an attorney to help you fill out bankruptcy forms? | | | | | | | | |
| | ✓ No | | | | | | | | |
| | Yes, Name of person | Attach Bankruptcy Petition Preparer's Notice, Declaration, and Signature (Official Form 119). | | | | | | | |
| 1.7.1 Van V | | | | | | | | | |
| AV AVERTANA V 800 AV | | | | | | | | | |
| THE RESIDENCE AND ADDRESS OF THE PERSONS ASSESSMENT ASSESSMENT ASSESSMENT ASSESSMENT ASSESSMENT ASSESSMENT ASSESSMENT ASSE | | summary and schedules filed with this declaration and | | | | | | | |
| | that they are true and correct. | | | | | | | | |
| X | /s/ Nicole Patten | × | | | | | | | |
| may work of the same | Signature of Debtor 1 | Signature of Debtor 2 | | | | | | | |
| A to deliberate | Date 1/5/2018 | Date | | | | | | | |
| 1 | MM/DD/YYYY | MM/DD/YYYY | | | | | | | |

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| Debtor 1 Nicole | | | | Patten | | Case number (if ki | nown) | | |
|-----------------|-------------------------------|---------------|--|---------------------|----------------|--------------------|--------------|---|--------------------|
| First N | ame | | Middle Name | Last Name | 1440,000 | | 1917 | | |
| | years before , or other pa | | bankruptcy, did yo | u give a financial | statement to | anyone about you | r business | ? Include all finar | cial institutions, |
| ✓ No Yes. | Fill in the de | tails below. | | | | | | | |
| - Innered | | | | Date issued | | | | | |
| Nam | | | | MM/DD/YYYY | | | | | |
| 14011 | | | | | | | | | |
| Num | ber Street | | | - | | | | | |
| City | | State | Zip Code | - | | | | | |
| Part 12: Sign | Below | | | | | | | | |
| | cy case can | | making a false states up to \$250,000, o | • | | | | | |
| | Signati | re of Debtor | 1 / | | | Signature of Debto | r 2 | | |
| | Date | 1/5/2018 | | | | Date | | | |
| Did you att | ach addition | al pages to ` | our Statement of F | inancial Affairs fo | or Individuals | Filing for Bankrup | tcy (Officia | al Form 107)? | |
| ✓ No | | | | | | | | | |
| Yes | | | | | | | | | |
| Did you pay | or agree to | pay someon | e who is not an atto | orney to help you | fill out bankr | uptcy forms? | | | |
| ✓ No | | | | | | | | | |
| Yes. Na | me of persor | | | | | | | o <i>n Preparer's Notice</i> Official Form 119), | 9, |

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| Debtor Nicole 1 First Name | Middle Name | Patten Last Name | r islanda, . Adalah | Case number (if known) | | |
|--|--|--|--|--|--|--|
| Part 2: List Your Unexpired | 그 기계 | | | | | |
| For any unexpired personal proj | | COLOR OF COL | itory Contr | acts and Unexpired | Leases (Official Form 106G |) fill in the |
| information below. Do not list reassume an unexpired personal pers | eal estate leases. Unexpired le | eases are leases t | hat are stil | ll in effect; the leas | se period has not yet ended. | You may |
| | | | . 11 0.0.0. | 3 005(p)(2). | | |
| Describe your unexpired pe | ersonal property leases | | | | Vill the lease be assumed? | |
| NVP | | | | г | → No | |
| Lessor's name: | | TATOMET CO. WAS CONTROL OF THE CO. | | Accessed to the control of the contr | Yes | |
| Description of leased | | | | _ | | |
| property: | | | | | | |
| Lessor's name: | | - | | | No | |
| we describe Y = we describe | IIII (III) нь это байга тайгтан таман т Таман таман та | or (printing) (AA) I to the hole of the Sills of the state of the Addition of the state of the state of the Sills of the state of the Sills of the state of the Sills of the S | ······································ | No. 10000000 artists - alleren Nacional Polici (Self Styreberlammade a maleramane s | Yes | |
| Description of leased property: | | | | | | |
| "MY CAN COMMISSION OF THE PROPERTY OF THE STREET WAS AN ARROW OF THE STREET OF THE STR | | | Charles and Albert sussection of Committee and Commission | | | |
| Lessor's name: | | | | [| No | |
| Description of leased | | | | L | Yes | |
| property: | | | | | | |
| . | And the state of t | | entre de la companya | | No | ** 1/4 Calabora* Volkanos. **, Addisantiferromenta |
| Lessor's name: | | | | L | Yes | |
| Description of leased property: | | | | _ | - | |
| Lessor's name: | redick tro van 1914 best verset en militer sins hin ake, seerdende er versinde versetende van en en en en en en e | Annual of American Control of States of Assertation Control of States of Control of Contr | ONORTHANALISMEN AND PRIMAR AND | omilianos e en mario e e e en mario e e e e e e e e e e e e e e e e e e e | No | Validilla Mallir (nie edindo), como vez e e e a vez mone |
| | 19 M Mill Connection States and the Section S | · · · · · · · · · · · · · · · · · · · | Manager Marketing Statement of Principle 1 | | Yes | |
| Description of leased property: | | | | | | |
| | | | | | ······································ | |
| Lessor's name: | | | | Ļ | □ No □ Yes | |
| Description of leased | | | | | 163 | |
| property: | | | | | | |
| at the second se | | | | | 7 N o | |
| Lessor's name: | | | | | Yes | |
| Description of leased property: | | | | | _ | |
| menne e danne de la company | | | | | and a second way to a second and as | |
| art 3: Sign Below | | | | | | |
| Under penalty of perjury, I dec property that is subject to an | clare that I have indicated my unexpired lease. | intention about a | ny propert | y of my estate that | secures a debt and any per | sonal |
| ✗ /s/ Nicole Patten | J. Commence of the Commence of | × | | | | |
| Signature of Debtor 1 | A-4-01-0-0-0-0-0-0-0-0-0-0-0-0-0-0-0-0-0- | • , | Signature o | f Debtor 2 | | |
| · | | | - | | | |
| Date 1/5/2018 MM/DD/YYYY | | | Date MM/ | DD/YYYY | | |

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UNITED STATES BANKRUPTCY COURT Northern District of Illinois

| Chanter | |
|---------------------------|---------------------------------------|
| Chamtan | |
| Chapter. | Chapter7 |
| CREDITOR MA | TRIX |
| ed list of creditors is t | rue and correct to the best of their |
| Patten, Nicole | |
| | CREDITOR MA ed list of creditors is t |

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| Debtor 1 Nicole First Name | Middle Name | Patten Last Name | Case number (| fknown) | |
|--|--|-----------------------------|--------------------------|--|---------------------------------------|
| | | | Column A Debtor 1 | Column B Debtor 2 or non-filing s | |
| 8. Unemployment compensation Do not enter the amount if you corunder the Social Security Act. Instead | | | \$0.00 | | · · · · · · · · · · · · · · · · · · · |
| For you | <u>\$0</u> | .00 | | | |
| For your spouse | <u>\$0</u> | .00 | | | |
| Pension or retirement income. D benefit under the Social Security Ac | | received that was a | \$0.00 | | Annual Management |
| 10.Income from all other sources r amount. Do not include any benefit payments received as a victim of a v international or domestic terrorism. page and put the total below. | s received under the Social war crime, a crime against h | Security Act or umanity, or | | | |
| | | | | | |
| Total amounts from separate pages | , if any. | | +\$0.00 | + | |
| 11. Calculate your total current mo | onthly income. Add lines 2 | through 10 for | \$2,905.40 | + | \$2,905.40 |
| column. Then add the total for Co | olumn A to the total for Col | umn B. | | | |
| | | | | | Total current |
| Determine Mathemather the | Maana Taat Annline te | - V | | | monthly income |
| Part 2: Determine Whether the | | | | | |
| 12. Calculate your current monthly in12a. Copy your total current month | • | w these steps: | Co | ppy line 11 here -> | \$2,905.40 |
| Multiply by 12 (the number of | months in a year). | | | | X 12 |
| 12b. The result is your annual incor | ne for this part of the form. | | | | 12b. \$34,864.80 |
| | | | | | ΨΟ 1,00 1.00 |
| 13 Calculate the median family inco | me that applies to you. F | ollow these steps: | | | |
| Fill in the state in which you live. | The specific of the specific of the Autoritism Science and Autoritis | Illinois | | | |
| Fill in the number of people in your | household. | 1 | | | |
| Fill in the median family income for household. | your state and size of | | | | 13. \$51,317.00 |
| To find a list of applicable median in instructions for this form. This list m | | | the separate | | |
| 14. How do the lines compare? | | | | | |
| 14a. Line 12b is less than or eq Go to Part 3. | ual to line 13. On the top o | of page 1, check box 1, T | here is no presumption | of abuse. | |
| 14b. Line 12b is more than line Go to Part 3 and fill out Fo | 13. On the top of page 1, orm 122A-2. | check box 2, The presur | nption of abuse is deter | mined by Form 122 | A-2. |
| Part 3: Sign Below | | | | | |
| | | | | | |
| By signing here, I declare under pe | nalty of perjury that the info | rmation on this statemer | nt and in any attachmer | its is true and correc | t. |
| ^/ | | | | | |
| ✗ /s/ Nicole Patten / / | The second of th | × | | | |
| Signature of Debtor 1 | | Sign | ature of Debtor 2 | PROPERTY OF THE PROPERTY OF TH | |
| Date 1/5/2018 MM/DD/YYYY | | Date | 1/5/2018 MM/DD/YYYY | | |
| and the property of the proper | | | | | |
| If you checked line 14a, do NOT | | | | | |